www.forgottenbooks.com

Copyright © 2016 FB &c Ltd.
All rights reserved. No part of this publication may be reproduced, distributed, or transmitted in any form or by any means, including photocopying, recording, or other electronic or mechanical methods, without the prior written permission of the publisher, except in the case of brief quotations embodied in critical reviews and certain other noncommercial uses permitted by copyright law.

THE

HOMŒOPATHIC RECORDER.

VOL. IV. PHILADELPHIA, NOVEMBER, 1889. No. 6.

POTENCY.

COULD we but satisfactorily explain, by the means of a readily understood, incontrovertible, scientific theorem, the entity of drug power in our potencies, the whole practice of homœopathy would, within a comparatively short time, be embraced by all practitioners of medicine, and the hope of decades—the amalgamation of all schools of medicine—would be attained, for all would be homœopathists *in fact*, and the result a scientific practice of medicine, working with the foundation of a fixed explicable law, would no longer bring upon the fraternity the present odium of disbelief by the laity in the unstable and contradictory knowledge of physicians.

Our law is, at the present day, entirely satisfactory to the majority of learned men and unbigoted physicians; our tinctures and lower potencies of the more active drugs are used with satisfaction by most of the schools; our purity and simplicity of preparation, neatness in pharmacy and handy method of prescribing are becoming greatly appreciated; and lastly, our splendid cures of nervous and highly chronic diseases are causing admiration; but mention a higher potency to any believer than that in which he can *see* the drug, and all respect, honor, truth and science in our practice vanishes before it in his mind like the theatrical ghost of Hamlet. Why? Simply because the prescriber himself cannot explain why the potency cures, nor that he has really used a palpable means to secure the end he claims.

Some years ago we published in one of our younger magazines an article upon "Potency Physically Considered," which seemed for some reason to call forth no response from the fraternity. Judging the cause to be the probable limited number of readers to a maga-

zine in its first year; and that the subject is one that should be studied and prove itself worthy of comment, being so necessary to our practice and neglected by our authors, we again take up the gauntlet in behalf of potencies and the defence of our practice.

No true follower of the immortal teachings of *Hahnemann* doubts for a moment the efficacy of our potencies, yet, when asked upon what he bases his belief in dynamized drugs, he is unable to give a satisfactory answer, because he cannot realize and becomes, therefore, incompetent to explain the force that is inherent in these, to him, phenomenal preparations. Who is there among you who read this that have yourselves "run up" a drug to the 15th potency, but gradually lost faith as the dynamization progressed beyond the second centesimal? Who, when adding a large amount of the inert to a small portion of the active, has not lost heart and carried his trituration no further? Let us hope that a thoughtful reasoning upon the following physical law will reinstate, or cause retention of the old faith in the potentizer and triturator, and give him a tangible argumentative anchor when called upon to defend his use of potencies.

Every elementary atom, compound molecule, mass or portion of a mass, organ, or cell, has a specific energy, distinctive, definite and absolute; a force perhaps allied to, but never duplicated in, different substances, and this force is the only true and radical distinction between substances.

All molecules are miscible, and, when in a state of mixture, act upon each other; on ekind of energy inevitably affecting another to a greater or less extent, and, as a result, that energy which has the greatest power will change the others, until ultimately they partake of its identity, or will form a new and distinct substance, the energy of which will have no similitude to any of its originators.

Here is a theorem and corollary which explains, in a very satisfactory manner to us, at least, the activity of the remedy in a highly dynamized drug. The atoms in a mass (say one grain) of mercury have a certain potential energy, which, in the whole mass, like the power of a man in a crowd of his fellow-beings, cannot be exerted, on account of lack of freedom, but separated, their energy becomes actual, and as such represents the true character of the element. This, then, is the one great use of the lower potencies—to separate the atoms of an elemental, or molecules of a compound body. Now, to carry the process further, and increase what we call the curative power of mercury, by reducing the drug or irritant power, we prove that *the molecules of water, alcohol, or milk sugar are less energetic than those of any drug that retains its power when immersed in these vehicles.* Now, turning to our corollary as above stated, and taking a drop of the last potency containing the drug atoms, placing it in not too many drops of any of these vehicles, and what takes place?

The energy of the drug being greater than that of the vehicle, it communicates its force to it, and the energy of the drug being all its specific identity, the vehicle having gained it, becomes in reality the drug itself, in a greatly diminished proportion, but a highly active state. Were too much of the vehicle used it would preponderate in energy and the drug itself would be lost. This much as a positive argument against the drop-of-medicine-above-Niagara-Falls bigot.

Following carefully an elaboration of this theorem and corollary, how many of the processes of the great material world might be explained! The mystery of emanating odors; the sensation of taste; the phenomena of heat, light and electricity; infection by specific miasms; disease; and, in fact, life and death as well.

In that process of animal and vegetable life called health, each cell of the organism has a molecular energy peculiar to the function it performs, and vitality is simply the sum of these different energies. As long as these energies can hold their identity against all interfering forces, so long are organisms in health; but when any of these functional energies are changed by more powerful ones, the organism immediately shows symptoms of the disturbing force, and therefore is diseased. The greater the disturbing force, the more acute the symptoms, even to death, which is really a total lack of correlation of the molecular forces of life—nothing more.

Here is the explanation of the law governing homœopathic medication. A prover takes a drug in an energetic irritant dose; it changes his forces thus and so, which change he records as the disturbing effect upon his organism, and when he finds another organism similarly affected, what is simpler or more scientific than his method of combating the signs of disease? He selects that force in a free and attenuated form which corresponds to the signs of energy lost, ingests it into the organism to supply the correlated deficiency, and proper vital energy is restored.

Again, infection by disease-energies becomes explicable. All persons are not susceptible to individual poisons; all do not contract diseases when directly exposed. Why? Simply because their vital energies are more powerful than those of the poison or disease, and cannot be affected by them.

Follow carefully these purely physical and soundly scientific points, and what a field of knowledge opens to us! Our law is explained and our potencies become entities that none but the most obtuse can doubt. We have proven them curative, but we could not give the why; can we not say a potency is a force *developed*, not *produced;* a fact explained as well as proven; a truth compatible with all the natural laws governing the universe.

To Prospective Provers.—To those who desire to make provings for the benefit of our science, and with that idea strongly in

mind seek out new or strange foreign remedies and products, allow us to suggest that, in the less complete portion of our Materia Medica, there are some very interesting and valuable plants on which the profession need more light, and which will prove to be fully as useful, in all probability, as any newer remedies. Among these are: *Lycopus Virginicus*, the Bugle Weed; *Ambrosia artemisifolia*, the common Rag Weed; *Robinia pseud-acacia*, the common Yellow Locust; *Melilotus officinalis*, the Sweet Clover; *Sarracenia purpurea*, the Pitcher plant; *Trillium erectum*, the Purple Trillium; *Nymphæa odorata*, the White Water Lily (on women); *Salix nigra*, the Black Willow, and *Populus tremuloides*, the Aspen. To those who are not botanists:

We will take pleasure in identifying any plant sent us, and to otherwise help any who may desire assistance in the matter of botanical references, etc.

SILICO-SULPHO-CALCITE OF ALUMINA.

Provings.

Dr. Geo. Herring reports the following proving of this substance in the *Hom. World* of August:

At the suggestion of the the *Hom. World* I procured the 3x trituration. To begin with myself: May 14th, took 3 grains to-day in divided doses; 15th, no well-defined symptoms; 28th, took 1 grain to-day; 29th, last night experienced a sort of creeping irritation of the skin, or underneath the skin, in the umbilical region, which kept me awake for some time, and as I could attribute this to no other cause, presume it was caused by the medicine. And, if so, *Slag* should be serviceable in some cases of *subcutaneous urticaria.*

After this experience I did not feel disposed to pursue the proving further; but I had prudently secured a substitute, which I always prefer, rather than to make prolonged experiments upon myself.

Second Prover.—This gentleman was apparently in good health, although he had two or three times previously been a patient with gouty pains in the foot, always speedily cured by *Bry.* 1x. He readily consented to take *Slag*, when the nature of pathogenetic proving had been explained to him.

May 10th. Took 3 grains to-day in divided doses. 11th. "Any symptoms this morning?" I inquired of him. "No; no symptoms," he said, "but I feel a good deal better than I usually do. Every night, before last night, I have had to unbutton the top buttons of my trousers from swelling out, but last night I didn't. I

haven't felt so well for a long time; I should like to go on with that medicine." 11th and 12th. Continue, 3 grains per day. 13th. No pathogenetic symptoms, but continued improvement of the flatulent distention. He is well pleased with the result of the proving. Besides being cured of the abdominal distention, he says, "I have lost the oppressive feeling I used to have over the heart." Medicine suspended. 17th. The improved condition still continues. 25th. Improvement still continues. He thinks this the best medicine he ever had.

From this case we may conclude that *Slag* is worth remembering when we have patients with similar symptoms. It would seem to be an analogue of *Lycopod.*

Third Prover.—Strictly speaking, this gentleman should not be called a *prover*, he having been a patient for some time, suffering from chronic constipation. However, there was one symptom appeared—soreness of the anus. Like the former prover he also had, sometimes, flatulent distention, and like him was cured of it.

May 13. *Slag* gr. xii.: to be dissolved in half a pint of water. One tablespoonful twice a day. 20th. He thinks the medicine is doing good, but has soreness of the anus. Continue, but reduce the dose to 6 grains to the half-pint of water. 27th. Improving; continue. June 3d. Bowels have acted more comfortably, and there is no flatulence. Continue fourteen days longer. 17th. Still improving; he certainly looks better. Change to *Lycopod.*

Upon the whole this medicine has been as useful as any, and we shall return to it on a future day.

Fourth Prover.—This lady had been under my treatment for a variety of symptoms arising from a delicate constitution, her mother having died of phthisis. Having begun to entertain high expectations of the remedial virtues of *Slag*, I decided to give this patient the benefit of it. Gave 1 grain twice a day. A week afterwards she returned much worse, having had these symptoms: diarrhœa, the bowels acting three or four times a day; great debility; quick pulse; lumbago-like pain in the back; inflation of stomach, etc., so that she had to unloose her dress. For these symptoms I gave Phos. and Phos. acid, afterwards Carb. veg., all of which were very beneficial. If I were ever to prescribe *Slag* again for this patient, it would be, of course, in a higher attenuation, and might then do good. I noticed in this case that the remedy had produced two symptoms, which in two other patients it had cured —*flatulent distention and lumbago.*

[The author suggests the name *Ferri-cinis*, Cinder of iron, for this drug as more euphonious and easily spoken. We judge that the name would be likely to prove misleading, as the compound contains little or no iron.—C. F. M.]

Prover.—F. C. B.,* thirty-three years of age; of rather dark complexion; of nervo-bilious temperament. He suffers from chronically enlarged tonsils, and failing to benefit by other remedies he experimented on himself with the *Slag*. This had no more effect on the tonsils than other medicines. He has no pain in the tonsils except when he tries to reach high notes in singing, when he experiences a sensation as though something tight were tied round the neck; with much mucus in the throat, sometimes easily detached, sometimes impossible to detach. He wakes with a clammy, dryish mouth. He has a very great tendency to take cold in the head.

Saturday, May 4, 1889. Took *Slag*, 6x trit., 5 grains. In the evening felt unusually drowsy.

Sunday, May 5th. Took 5 grains morning, noon, and night. Felt unusually drowsy in the evening.

Monday, May 6th. Took 5 grains morning, noon, and night. Awoke with dull frontal headache; want of energy; pains in the limbs; throbbing in the left tonsil, with aching pain; pains in both knee-caps, sometimes dull, sometimes aching; aching pain between shoulders and in left elbow, with dull, heavy sensation, alternating with aching in region of spleen.

Tuesday, May 7th. Took one dose in the morning only. Awoke with pain in the forehead, of a dull, stupefying character; pain between shoulders; cold in head, which *Natr. mur.* 6c failed to make any impression upon, but which *Acon.* and *Cham.* 1c, alternately, soon removed. Pain in head in the evening of this day extended to the right temple, with sensation of stiffness at the back of head and neck. (The headache was a constant effect of the *Slag*.)

Wednesday, May 8th. Took no medicine. Awoke with thickly-coated tongue (grayish), with terra-cotta-colored streak down the middle; shifting pains in the right elbow, changing to left elbow, then back to right again; aching, dull pain across small of back; dull, frontal headache, with stiffness of back of head and neck; little appetite; very frequent urination (seven or eight times a day); pain in region of spleen, and stitches in region of heart, with slight palpitation.

Thursday, May 9th. Took no medicine. Awoke with slimy tongue, slight frontal headache, and stiffness at back of head and neck; pain in lower part of back; less frequent urination. More energy than have had since commencing to take it (I had felt fit only to lie down every evening since commencing it until this one).

Friday, May 10th. No medicine. Slimy tongue on awaking, with usual dulness of forehead and stiffness at back of head. This *now*

---

* *Hom. World*, October 1, 1889.

goes off slightly on moving about; feel much more energy; occasional shooting, aching pain through the knees, felt most on going upstairs; appetite improved; urine rather darker than usual.

Saturday, May 11th. No medicine. Usual headache, and back pain, worse on stooping.

Sunday, May 12th. No medicine. Usual headache.

Monday, May 13. Took *Slag* 12c dil., 5 drops three times a day in water. Dulness of head increased by it; then all symptoms passed off.

NEW AMERICAN REMEDIES IN DYSPEPSIA.*

Iris Versicolor.—This remedy acts throughout the entire alimentary canal, but more especially upon the superior portion, the salivary glands and the pancreas. It may be employed in preference to *Nux* and *Puls.* in diseases of the stomach when the following symptoms concur: Violent pain in the region of the stomach that comes on at intervals; vomiting of food an hour after eating; bilious vomiting; acid contents of the stomach with or without pain; inflammation of the œsophagus and duodenum. Any of these symptoms authorize the employment of *Iris*, with the probability of good effects.

Lithium carb.—May be found useful in obstinate acidity of the stomach.

Lobelia inflata.—Frequently useful in the lower potencies in spasmodic cardialgia, in bilious gastralgia, and in the terrible pains caused by the passage of biliary calculi. In all potencies it is homœopathic to that form of vomiting, accompanied by great prostration, cold sweat and weak pulse.

It is also useful in cases of vomiting produced by violent emotions, in the same manner as *Gelsemium* in cases of involuntary dejections from the same cause.

Dr. Jeans has employed this remedy with excellent results against many symptoms of dyspepsia, and considers the principal indication for its use to be *sensation of debility and oppression at the epigastrium, with oppression of the chest.* In many cases where the oppression of the chest is insignificant, still the use of Lobelia is often beneficial, as the following clinical case shows: A subject 45 years of age, large, robust, suffering from a copious hæmorrhoidal flux and its consequences, debility and pressure at the epigastrium, with some acidity of the stomach. He had administered to him *Nux* and other remedies without result, until finally a slight oppression

---

* *El Consultor Homeopatico*, August, 1889.

of the chest was apparent and Lobelia was given, and the following day the patient began to recover his vigor; the oppression of the chest disappeared, the gastric symptoms, the hæmorrhoidal flux; the patient was also freed of a debility of the rectum, and the anal muscle, that had incommoded him many years, was strengthened.

Among Botanists this drug has enjoyed the reputation of an excellent anti-dyspeptic; used in doses of 3 to 4 drops before eating, it has the reputation of acting as an aperient and auxiliary to good digestion; however, its abuse debilitates the stomach and its function.

In dyspepsia produced by the abuse of green tea, tobacco and poor liquors, whereof patients present usually symptoms of debility of the stomach, it is very efficacious.

Dr. Jeans's characteristics for the employment of Lobelia are: Dyspnœa constant, aggravated by the least exercise or exposure to cold; chronic paroxysmal asthma; weakness and pressure on the epigastrium, rising thence to the heart, with or without heartburn; sensation of a foreign body or quantity of mucus, with oppression in the larynx; frontal headache, passing from one temple to the other; pain in the shoulder; pain in the left side; urine deep in color; oppression over the epigastrium, with simultaneous oppression of the heart.

Myrica cerifera.—This remedy is of the highest importance in gastro-intestinal disorders. Principally the symptoms are: Unnatural hunger, followed by indigestion and icterus that tinges the skin yellow; fulness in the region of the liver and of the abdomen; retention (*encasa*) of the urine, which is yellow and frothy, deepening in color daily, discoloring the linen; great debility and somnolence, even to stupor.

Oleum Cujeputi has cured many cases of nervous vomiting, dysphagia, and spasmodic constriction of the œsophagus.

Oenothera biennis.—The probable action of this remedy is presented in the following cases: A man 26 years of age, active, had had dyspepsia for five years, and great pain in the region of the bladder, with frequent desire to urinate. He had been treated by various systems without beneficial results, until his case had become famous, and attributed to the presence of vesical calculus. *Oenothera* and *China* before eating produced immediate and certain relief.

A dyspeptic subject, age unknown, suffered especially from vomiting of food after eating; wakeful during the night, aggravated by repeated evacuations of urine. *Oenothera* before meals cut short the vomiting, relieved the irritability of the bladder, and permitted rest during the night.

Podophyllum.—The action of this remedy upon the digestive tract is very extensive and energetic, but its symptoms are more promi-

nent upon the liver and intestines. It is especially useful when the disease is characterized by symptoms in those organs. It is very valuable to combat those dyspepsias occasioned by the abuse of mercurials.

Pulsatilla Nuttalliana.—Stinging and bruised sensation at the entrance of the stomach; cutting pain in the stomach, with distention of the abdomen, and dull headache; sour eructations; melancholia; nausea without vomiting; pain in the epigastrium; acute cutting pain in the stomach, extending to the spine; indigestion, dyspepsia, and vomiting of the pregnant.

Populus tremuloides.—Dr. Coe, in his "Conc. Org. Remedies," recommends *Populus* in the following cases: Indigestion, flatulence, lumbricoids. "As a remedy for indigestion, with flatulence and acidity, I know of no simple agent more to be relied upon." As a tonic it is tolerated by the stomach in hysteric cases when all others are repugnant, and for the same reason it is an excellent remedy for dyspeptic symptoms in the pregnant.

CALENDULA AND ECZEMA.*

I WAS called upon to attend, in October, 1888, a gentleman of about thirty-two, a high official in the Cooch-Behar State, suffering from chronic eczema affecting the left leg. The past history of the case, as described by the patient, is given below in his own words: "A wonderful cure," says the patient, "has been effected by *Calendula* in a very bad case of eczema. A patch of vesicles, believed to have originated by contact of saltish well-water in the up-country in November, 1887, about two and a half inches above the left ankle-joint anteriorly. Various kinds of medicines were applied, but to no purpose. The ulcer, however, disappeared by itself without any medicine But no sooner had the ulcer healed up, than another abscess-like swelling appeared about three inches above the ulcer just healed. It was opened, and poultices and ointments were applied. But the ulcer dragged its slow length, in spite of the applications, until the surrounding parts were inoculated, and about thirty pimple-like eruptions broke out on all sides. A quack, who was reputed to have cured many such cases, was consulted, and his medicines were applied for a couple of weeks. He cured the surrounding eruptions, but not the original one, which had attained a chronic state of a year or so. Finding the quack's medicine did not have any effect on this ulcer, I consulted Dr. Rádhákánta Ghosh, who, at first sight, pre-

---

* R. K. Ghosh in *Hom. World*, October, 1889.

scribed the above-mentioned medicine. The cure was effected in about twenty-one days."

Now, when I saw the patient, I noticed the ulcer was larger in size than a one rupee silver coin, covered by a yellowish crust, formed by drying up of the discharges from it. When the crust was taken off, I noticed much slough all over, proud flesh in the centre, with depression between the proud flesh and the raised edges and fissure-like cracks all over the ulcer, with much painful swelling of the leg and foot and redness of the surrounding parts, looking like diffused erysipelatous inflammation. I prescribed *Calendula* lotion (*Calendula* ℥ mxx., *Aqua* ℥j), to be applied to the sore by saturating a piece of linen rag folded into four folds, with instructions to keep the sore constantly moist with the lotion, keeping the saturated linen rag in position by means of a bandage. To my surprise, and that of the patient, the slough was almost cleared off in about four days, the proud flesh and the fissures reduced to the same level with the surrounding skin or tissues. The ulcer assuming a healthy appearance, I ordered the continuance of the *Calendula* lotion, but in a milder form (*Calendula* ℥ m.v., *Aqua* ℥j). On the eleventh day from the commencement of my treatment, the ulcer almost healed up, but commenced itching and burning very much, to the great annoyance of the patient. On examination, I was led to the belief that the formation of healthy granulations in the part of the ulcer which yet remained to be healed up was being much hindered by the irritation produced by the lotion, which I believed made the surface of the ulcer rather raw, and on account of which the patient felt a sort of tensive and burning uneasiness. To remove the irritation I thought some *oily application* was necessary. I accordingly prescribed *Calendula* oil (*Calendula* ℥ m.v., Olive oil ℥j), a little to be applied to the sore by means of a piece of lint, to be kept in position by means of a bandage as before. The ulcer healed up in about three weeks.

I have been apprehending a recurrence of the disease, as my experience has taught me to believe that it often recurs. It is now about ten months since the case was cured, and I am glad there has been no recurrence of the disease, nor has any inconvenience been felt by the patient, who told me that he did not apprehend a recurrence of the disease. It is worthy of notice that when I took up the case I was of opinion, as were also those gentlemen who treated the case previousto my undertaking the treatment, that my attempt at curing the case would not be successful. I was led to the opinion from my personal experience, gained from a very large number of cases of the same disease which I have been called upon to treat from time to time in the course of my last seventeen years' practice as a homœopath, and especially from my own case, when

I had a patch about two inches above the right knee-joint, which had spread on all sides, occupying a circumscribed space, the diameter of which, if I remember aright, was about three inches, and which lingered over two years, and made the movement of the knee-joint very painful in spite of all kinds of treatment, namely, allopathic, homœopathic, aurvedic, and quack medicines, and which, at last, yielded to *Rhus* lotion and *Rhus* oil externally (*Rhus tox.* ℮ m.v., *Aqua* ℥j and *Rhus tox.* ℮ m.v., Olive oil ℥j) respectively, and *Arsenic* 3x trit. in half-a-grain doses, a dose every day at bedtime at night. I was cured in two weeks or so by these agents.

Slough, proud flesh, and raised edges were the indications for my prescribing *Calendula* in the case above referred to. I must also add that these three indications, more especially the first two, have always been my guide in the selection of *Calendula* in cases of ulcers with decided success. I never tried *Calendula* in cases of eczema before the case mentioned above came under my treatment.

I must add that I believe constant moist application over the sore is the *secret of cure* of eczema. I have often found constant application of even *unmedicated water* to the sore giving much relief, or even curing many cases of chronic eczema.

HOMŒOPATHIC THERAPEUTICS.

Army Diarrhœa—*Bryonia.*—Mr. O. W., age 45, suffered from diarrhœa, antedated by army fever, followed in six months by sun- or heat-stroke. The peculiarity of the diarrhœa when received as a patient for treatment was: Sudden, foamy diarrhœa, following a few days of regularity of the bowels, recurring in this manner week after week since he left the army. Diarrhœa always comes on when working in the sun. Pain all through the head; dropping of blood from posterior nares; bad taste in the mouth mornings; tongue slightly coated and cracked; bloating of the stomach after meals; appetite good for all meals except breakfast; sharp, stitching pains in the region of the stomach and liver; frequent desire to urinate, with smarting and burning during the passage of the urine; difficult inspiration, cannot fill the lungs readily; oppression of the chest; lameness and soreness of the neck, and drowsiness. This suite of symptoms prevailed during looseness of the bowels. During the intervals of the bowel trouble he was able to work at his trade (car repairer) with comfort and pleasure. I gave him *Bryonia* 30, 12 powders, one to be taken morning and night every other day. This prescription markedly relieved all his symptoms, and, after a

month of placebo, I gave him a dose of *Bryonia* 500 (Tafel), and had the pleasure of seeing him entirely cured in two months.

Taking such a case as this one, lasting over twenty years in spite of constant allopathic treatment, the following remark of Hartshorne, in his "Essentials of Practice," shows bigotry of the most unlearned type. In detailing the "great leaders and reformers of medical practice," he says: "I leave out of this list . . . . . and the Hahnemannic homœopathism, as, however serious have been their detrimental effect upon the welfare of the public at large, they have scarcely influenced the progress or present status of medical science (1871) either for good or evil." C. F. M.

Aspidospermine*—*Dyspnœa.*—This alkaloid is from the South American tree—*Quebracho.* The maximum dose, according to Merck, is $\frac{1}{10}$th grain. I use the $\frac{1}{100}$th trituration, which I find most efficient in doses of 2 to 5 grains.

Case I.—A boy of 10. The attacks of spasmodic dyspnœa were a sequel of hay fever. The aggravation was at night, when lying down, or sleep was impossible. I tried Ipecac and Arsenic, but with no effect. Aralia, also. (I never had any curative or palliative effects from Aralia.)

Prescribed Aspidospermine, $\frac{1}{100}$th trituration, 2 grains every two hours, all day. The night was comfortable, could lie down and sleep. Continued the remedy for four days, when he was so much better that the medicine was suspended.

Case II.—Cardiac dyspnœa in a man of 60. Valvular disease, hypertrophy with dilatation. Distressing difficulty of breathing from the slightest exertion; had to sit upright day and night. Face livid from venous stasis. Strophanthus regulated and strengthened the heart's action, but only slightly benefited the dyspnœa. Five grains of Aspidospermine, $\frac{1}{100}$th trituration every two hours effected a marvellous change. He could walk about the house and out to his carriage with but little discomfort. He has now continued it three weeks. Observes no unpleasant symptoms. Can lie on his back and right side and is very grateful for the relief. It seems to act well as an aid to Digitalis, or Strophanthus, in cardiac dyspnœa.—Edwin M. Hale, M.D. (Communicated.)

Hydatids of the Liver—*Phytolacca and Conium.*—Dr. R. S. Gutteridge reports the following cure of a case of this disease, in the *Hom. World* for August:

---

* *Aspidospermine* or *Quebrachine* is derived from the Chilian "white Quebracho" (*Aspidospermia Quebracho*). At Santiago de Chile the bark is used as a substitute for Cinchona as a febrifuge. The alkaloid forms salts with Citric, Hydrochloric and Sulphuric acids.

On the 22d of April, 1875, a young man from the country, aged 30, a grocer, presented himself to me as a patient, remarking, "You see before you a dying man." He was asked to explain himself. He said he was suffering from hydatids of the liver. That he had been at St. Thomas's Hospital, had been tapped twice, and that in the fluid drawn off the hydatids had been found. That on becoming again dropsical for the third time he had presented himself at the same hospital, but they declined to operate, and informed him that the tumor might burst at any time, in which case death would instantly ensue. This was the more, he thought, to be regretted as he wanted to get married, which, under present circumstances, was impossible, as the father of the lady positively refused to allow his daughter to ally herself with a man whose life was so precarious. The patient had consulted several physicians, but the verdict was everywhere the same, so that his brothers, with whom he was in partnership, remarked on his coming away on the morning in question, that he was simply going to waste more time and money on an errand as fruitless as all the others had been.

The patient was of middle height, fairly built, presenting exactly, in the face, the yellowish pallor previously described. The abdomen was considerably distended and fluctuation unmistakably present. There was no tenderness of the liver, but a foul taste in the mouth and, occasionally, his water was white. I prescribed for him *Conium* 2x, 3 drops twice a day, and *Phytolacca* 2x in trituration, 3 grains dry on the tongue, night and morning. These medicines were never changed. I have ascertained that he had his prescription made up forty-three times. I also ordered smart friction of the abdomen night and morning. On July 5th the patient was seen again, when he reported himself as a great deal better in health, better in every way; he is considerably smaller around the abdomen. He was to continue the medicines. By November 2d of the same year he had regained his usual health. Until fluctuation was discovered the authorities at St. Thomas's had resolved to use galvano-puncture.

This young man was seen again in March of the next year, when he reports that he had been quite well for some months, but was now suffering from nervous sensations and indigestion, for which I prescribed. He has remained quite well up to the present time, and has all along managed a large business.

Sunstroke—*Glonoin.*—N. E. Deane, surgeon, reports the following cases in the *Hom. Review* for September: In July, 1883, the master tailor of a line regiment stationed in Ireland complained to me of a headache which often almost incapacitated him from work, especially when stooping in the workshop in the course of his duty. About seven years before, he had had sunstroke in India, and ever

since had suffered continuously with a heavy, pressive pain at the occiput, at times accompanied by throbbing. He was a temperate man. Having undergone the various orthodox methods of treatment both abroad and at home, I decided at once to give him *Glonoin*, being then somewhat inexperienced in the action of the drug. I put about 10 drops of the 1x into a tumblerful of water, and told him to take a dessertspoonful three times a day. I saw him a week later. He had only taken two doses of the medicine, because as soon as he had taken it "he thought he was going mad!" In about six hours this medicinal aggravation passed off, and with it the original headache; and he expressed himself as "not knowing how to feel without his headache." On inquiry from India, two years later, he had had no return of his trouble.

CASE II.—The next case is a parallel one, but well illustrates the difference in the action of the medicine when given in a tropical climate and during a continuance of the disturbing influence—the sun—and when given in a cool climate:

In August, 1886, in Bombay, a sergeant of a line regiment complained to me of a pain at the occiput, spreading over the vertex and round the temples. He had sunstroke in 1878, was insensible for eight days, and was invalided home for change of climate. Since then he has been subject to these headaches when walking much, or when out in the sun, even when protected.

Belladonna failing to relieve him, on August 10th I gave him one drop of *Glonoin* 1x, he then being prostrated with the pain at the occiput, face flushed, and throbbing arteries. In half an hour he began to perspire about the head and then all over the body, with very slight increase of the occipital pain. In little more than another hour he had a remarkable feeling of cheerfulness, merely experiencing a slight heaviness in the head, and was able to eat, which he had not felt inclined to do for three days. The next day the pain returned slightly, and I gave him two doses of *Glonoin* 1x at intervals, with still less aggravation and no consequent perspiration. For the next day or two he had no headache in the day, but at night, when lying down, it came on. I gave him a dose of *Glonoin* night and morning from August 13th to 23d, when he was perfectly free of all headache, and had comfortable nights. He had no rise of temperature during the height of the paroxysms. On September 9th I was sent for to see him, and found the symptoms had returned with great severity. He had been on the rifle range in the sun, and shooting in the glare from 6.30 A.M. until 2 P.M., with half an hour's intermission for breakfast, and on getting home he was again prostrated with the pain. *Glonoin* relieved him again, but on October 11th he was still suffering from some headache, when I lost sight of him.

With reference to these cases of bursting, occipital headaches, following exposure to the sun, I may say I find *Glonoin* almost specific, and the drug will not affect pain situated elsewhere in the head in the same way unless accompanied by the occipital pain. In the tropics I find the dose must be larger, and a patient will not gain immunity from a fresh access of pain, under the medicine, when exposed to a tropical sun, especially on an empty stomach, though such immunity seems to be conferred in this country.

Neuralgia—*Diadema.*—J. Compton Burnett, M.D., reports, in the *Hom. World* for September, the following case:

For a number of weeks I had been treating a maiden lady of twenty odd years of age for bad neuralgia, but it would not yield to my pet remedies for neuralgia. I confess to having pets in great numbers. I have been reproached with using the same cases several times, but I would submit that the value of clinical evidence lies not in the cases themselves, or in their being heretofore unpublished, but in the lessons they teach. And where a given case teaches several distinct points, using such a case once for each point under study is perfectly fair and legitimate. Thus, for instance, if *Sulphur* rapidly cures a case of neuralgia of the heart, and at the same time brings back to the surface a long pent-up cutaneous affection, such a case may very properly do duty:

First, in treating of neuralgia—Did it not cure a neuralgia?

Secondly, in treating of heart disease with pain, the pain being a synalgia—Was the heart not cured by it?

Thirdly, in treating of the ill effects of suppressed skin affections—Was the suppression not cured by it?

In fact, I would go so far as to maintain that thus utilizing one's clinical data each time separately from one standpoint only is the true way; and the reader is not only not wronged, but, on the contrary, is likely (if not blinded by conceit) to have his view of the nature of disease widened, and his power to cure augmented.

Well, this case has never been inflicted upon a long-suffering world, though it would teach no less if it had.

She wrote: "I am still as bad as ever with neuralgia. Every evening punctually at 7 o'clock I begin with it in my face and head; mostly it leaves my teeth in an hour or two, and only continues in my head. When I once get to sleep I have a very good night until about 4 or 5 in the morning, when I wake always with toothache and neuralgia. . . . . My best time is from 3 to 7."

Diadema 3x, 6 grains dry on the tongue every four hours, cured this *clock-like regular* neuralgia right off, and it did not return. Patient was very pronouncedly of hydrogenoid constitution.

Glonoin with Strophanthus.—The new cardiac remedy, *Strophanthus*, does not contract the cardiac arteries, nor does the better known Digitalis. But Dr. Thompson finds that alternating Glonoin with Strophanthus augments greatly the value of the latter in weak hearts with contractile arteries. He publishes his various interesting cases that illustrate the combined action of Glonoin and Strophanthus and of Strophanthus and Digitalis, with very satisfactory results. The usual dose given is 3 to 5 drops of Digitalis or Strophanthus combined with 1 or 2 drops of the first centesimal potency of Glonoin.

Since the publication of Dr. Thompson's article, I have had an opportunity of attesting his practice in a case of dilatation of the heart with great anasarca, senile. The arteries were very tense and rigid, owing to atheroma; great dyspnœa, with a quick, intermittent pulse. The previous medical attendant administered Digitalis alone in doses of 10 to 15 drops three times a day, aggravating all the symptoms. I prescribed 3 drops of Digitalis every four hours, alternating with Glonoin 1 drop at the interval stated. In less than twelve hours beneficial effects were observable from this method. The dyspnœa was relieved; his previously cold extremities now became warmer; the urine augmented, and the pulse and heart's action became quite regular; the dropsy disappeared in a week.

For many years I have been in the habit of using Aurum in these cases; procuring a similar effect upon the arterial system as found under Glonoin, but not so promptly. *Aurum muriat. et sodic.*, in doses of $\frac{1}{100}$th or $\frac{1}{200}$th of a grain, is the best preparation.—(———) *La Reforma Medica.*

Hay Fever—*Ambrosia Artemisiifolia.*—Of late years much attention has been called to the species of the genus Ambrosia (the Rag Weeds) as being, through the agency of their pollen, the cause of hay fever. Many people afflicted with this troublesome complaint lay the charge directly at its doors, while others claim that, in all probability, it is the direct cause, as their sufferings always commence during the anthesis of the plant. The general impression, however, both among the laity and the medical fraternity, has been that the effect was a purely mechanical one, the nasal mucous membranes being directly irritated by the pollen dust in substance. If this were true, would not every one suffer from hay fever? Impressed with the above report, I had the pleasure of curing two attacks while writing my work upon "American Medicinal Plants," in which the above species figures. Since the publication of the work, all the cases I have had of the disease (four) have yielded beautifully to the 3d centesimal potency of the drug.

The four cases, Mr. B——, Mrs. I——, Mr. C—— and Miss P——,

presented the following generic symptoms: Inflammation of the mucous membranes of the nose, adventing yearly in the autumn. At first dryness, then watery discharges, finally involving the frontal sinuses and the conjunctival membrane. In Mr. B. and Miss P. the irritation extended to the trachea and bronchial tubes, in Mr. B. amounting to severe asthmatic attacks. In all cases the coryza was very severe, and in previous years lasted, in spite of all treatment, from four to eight weeks. Mr. B. has found relief from *Ambrosia* 3, three times a day, in from four to six days, for three successive years, with no return of the trouble in the same year; Mrs. I. has been relieved in from two to four days for two years; Mr. C. gets immediate relief in twenty-four hours (three seasons); Miss P., in this her first experience with *Ambrosia*, found entire relief from six doses.

C. F. M.

Lumbago—*Oxalic Acid.*—In reading in one of the foreign journals, some time ago, an article upon the treatment of lumbago, I was astonished not to find *Oxalic acid* among the remedies to be considered in that disease, as striking cases calling for this remedy seem more or less common, at least in this region. The following clinical case presents the peculiarities of the drug:

Mrs. S——, age about 55, suffered for several days from an excrutiating attack of lumbago. Her physician (homœopathic) had about exhausted his knowledge of applicable remedies in her behalf. On the fifth day I was called by telegraph (being then in New York City), and on arrival found her presenting the following symptoms, and taking Rhus tox.: Terrible pain in the lumbar region, extending down the thighs and over the region of both kidneys; extremely anxious to change position frequently, but the slightest movement, assisted or unassisted, caused her to shriek out in agony; frequent desire to pass large amounts of urine, but the pain on moving was so great that she would shrink from the attempt; legs numb and very weak and cold; pulse rapid; short, distressed breathing in general, though at times there were intervals of easier respiration; appetite normal, though swallowing was difficult and painful. I prescribed *Oxalic acid* 30th in half-hour doses, and had the pleasure of hearing that two hours afterward she could be placed upon the vessel with very little pain. She sat up twelve hours after, and in twenty-four hours was entirely relieved.

C. F. M.

Anemone Pulsatilla in Diseases of Women.—Among the new remedies lately incorporated into the materia medica, Anemone pulsatilla is one of the most important, as regards its efficaciousness, as well as the many uses to which it may be put. For the

last five years a series of works have appeared on the method of action of this plant, in all of which its certain action is made prominent. Dormant has used it in *orchitis blennorrhagica*, by means of which he has cured 75 per cent. of the cases coming under observation. Bazy has seen the pains of this trouble disappear in one to three days from its use.

The remedy acts in the very same way in those diseases in which the condition in question is a painful female affection. In *dysmenorrhœa*, as well as in *chronic metritis* and in *inflammations of the uterine adnexa*, the writer has used the remedy in regular doses, especially in those cases in which the condition was characterized by a prominence of pain in the affection. Its action is somewhat analogous to that of Aconitine in painful neuralgic affections. The remedy seems to have a pronounced action upon the nervous system.

Contrary to other authors, who ascribe the greatest efficaciousness to the tincture prepared from the dried leaves, the writer has found that this preparation by far does not act as intensely as an alcoholic extract from plants freshly gathered in the month of June, in which equal parts of the plants and of a 90 per cent. alcohol were used. Less efficacious than this extract is the glucoside of the plant, *Anemonine*.

As to the dosage and use of the remedy, the writer gives, in dysmenorrhœa, four days before the beginning of the expected menstruation, 4 tablespoonfuls of wine having about 10 drops of the alcoholic extract to the teaspoonful.

As soon as menstruation begins, the remedy is discontinued for three or four days, and then finally given in the same dose for three or four days again.

By this procedure the dysmenorrhœa was often observed to be cured in the second month. If chlorosis be present, then Chlorate of manganese is given in doses of 0.05 grain per teaspoonful. In cases of ovarialgia, in consequence of chronic uterine imperfections or inflammations in that neighborhood, the remedy is given in the same doses until the pains have disappeared. Complications in the course of treatment with the remedy have never been observed.

As to the dosage of Anemonine, it was given in daily doses of 0.05 to 0.1, and never higher than 0.2. Its action is much less certain than that of the alcoholic extract, as in long-keeping it is liable to undergo changes.—*Jour. de Médicine de Paris*, 14, 1889; *Allg. Hom. Ztg.*, 8, 1889.

P. AND P.

Nuphar Lutea—*Chronic Diarrhœa.*—An exceptionally interesting and intractable case of the above complaint resisted the ordinary remedies usually administered, as well as the promiscuous experimental measures of the superannuated school.

History.—Johnnie H., aged sixteen, weight ninety-eight pounds, spare build and bilious temperament. He has the appearance of a boy that has undergone some wasting disease. His growth is stunted, his flesh flabby, skin shrivelled and yellowish. Says his present trouble originated when he was only two years of age, the attending physician at that time pronouncing it "summer complaint," and that the diarrhœa, which at certain periods of exacerbation assumed the nature of dysentery, has continued uninterruptedly up to the present time, the only amelioration noticeable occurring in the fall.

The evacuations were characteristic of *Podophyllin;* watery, painless and quite copious, yellowish in color and very offensive. They numbered from three to ten a day. No prostration immediately after, but a constant feeling of physical exhaustion. The kind, quality and quantity of food he subsisted on governed the frequency of the stools, consequently cautious dieting conserved his strength. His appetite was capricious and changeable, and his emaciated face bespoke an impoverished body. A three weeks' trial of *Pod.* 3x and 6x proved its inefficacy. The following remedies were then had recourse to: *Colc. c.* 3, *Hep. s.* 3, *Phos. ac.* 6 and *Sulph.* 6. They were followed by no better results, but on re-canvassing the case carefully, *Nuphar lutea* was decided on as the *similimum.* He took one dose of the 3x every four hours, and his improvement was immediate and permanent. He is now well and hearty, the evacuations having assumed their natural consistency.—*Southern Journal of Homœopathy.*

Natrum Muriaticum—*Seaside Headaches.*—A young lady complaining of severe headaches, coming on only at the seaside, beginning in the morning and lasting until night, was treated with *Natr. mur.* 10m. In two days the pain had quite vanished, although previously so severe as to often confine her to bed. To be perfectly sure, I put the question to her: "What was it that cured your headaches?" "Why," replied she, "I suppose it must have been your powders; at least, I took nothing else for them." Note: that the headaches did not re-appear during a further sojourn of weeks by the sea; which being interpreted is, that the potency continued the whole time to antidote the tendency of the crude drug.—Dr. Burford, in *Hom. World*, 456, 1889.

ITEMS OF GENERAL INTEREST.

On the Action of Chromium.—Pander publishes a work upon the action of Chromium. Chromium comes under consideration in two forms: (1.) As an oxide; (2.) as Chromic acid. The Lactate of chromium and Natrium was proven as the most proper one to

determine its pharmacological action. In all cases where the Chromoxide salts were proven, prominent general poisoning symptoms were wanting, but there was an increasing cachexia, combined with symptoms of a *chronic nephritis*.

The *post-mortem* results were the same after subcutaneous injection as when introduced into the stomach; the most important changes were found in:

I. Digestive Tract.
II. Kidneys.
III. Blood.

I. *Digestive Tract.*—Injection of the vessels; epithelial necrosis, even to the formation of croupous and diphtheritic membranes, ecchymoses and, eventually, ulceration of the solitary follicles and Peyer's patches.

II. *Kidneys.*—In all acute cases parenchymatous nephritis could be proved present, passing over into the interstitial form when the poisoning is chronic. The principal part (72 per cent.) of the Chromium injected was found to have passed over into the urine, *hence, the kidneys are the chief places of elimination.*

III. *Blood.*—Blood has the raspberry-color, leading one to think of leucæmic blood. The heart showed, in some cases, endocarditis and hæmorrhages and ecchymoses from the vessels. It had no action upon the blood-pressure and action of the heart in the form of a Chromium salt, although 12.5 grains were injected into a small dog's vein. The various organs contained Chromium after washing out the vessels, more or less, the liver the most, then the digestive tract, and finally the kidneys.

Chromic acid is, in frogs, 8 times more poisonous than Chromic oxide salts; in warm-blooded animals it was 100 times more poisonous. The symptoms were the same as in Chromic oxide poisoning, only more intense.

The Chromates were also without influence upon the vascular system. Upon *post-mortem* examination endocarditis and numerous hæmorrhages into the endo- and pericardium and ecchymoses. In nephritis, as a consequence of poisoning by Chromates, necrosis plays an important part. He places the action of Chromium upon the digestive tract and kidneys as greater than that of Arsenic, Antimony, Cobalt and Platina, and it is not far removed from that of Mercury.

P. AND P.

Sedum Acre—*Its Action.*—The active principle of Sedum acre is an alkaloid, of which easy decomposibility has prevented chemical analysis.

Jüngst has investigated the action of the hydrochlorate and sulphate of the alkaloid, the freshly expressed juice and the alcoholic

extract. The extract and the plant have no specific pharmacological properties. Cats are more sensitive to the alkaloid than dogs. The symptoms of an acute poisoning are: After a preceding stage of choking and vomiting, increasing anæsthesia and stupefaction appear; the voluntary movements of the (skeletal) muscles decrease progressively; the respiration becomes forced and superficial, the respirations decrease more and more in number; spasmodic movements of the extremities, with dyspnœa appear. Death takes place from cessation of respiration, the heart beating after the cessation. In cats, there were distinct mydriasis and photophobia, together with violent distortion of the bulb, outwards and upwards. The activity of the salivary glands, as well as that of the digestive tract, is excited. Applied locally, the freshly-expressed juice of the plant causes distinct and increasing burning, with a growing redness of the skin; the alcoholic extract is inactive in this direction. Upon man, there resulted violent headache, together with gastric disturbance (nausea, anorexia, etc.).—*Archiv. f. Exper. Path. n. Pharmak.*, 24, 1888.

Deadly After-action of Chloroform.—Dr. Strassmann has made experiments, which are mere reprovings of Ungar's provings published in 1887. Ungar narcotized dogs several times, and examined the dead ones in the first hours (up to twenty-seven hours) after the cessation of the narcosis, and found great fatty degeneration of the heart and liver; secondly, the kidneys and the striped musculature, and finally the stomach and other mucous membranes. Strassmann resumes as follows:

1. After a lengthy chloroforming in the dog, a fatty metamorphosis of the internal organs, especially of the liver; secondly of the heart, and rarely that of other organs.

2. The increase of the excretion of nitrogen in hungering animals under the influence of chloroform shows an increased destruction of nitrogenous substance, hence the condition in question is one of fatty degeneration, and not of fatty infiltration.

3. Sometimes lengthy chloroforming of the dogs—at the highest, thirty hours—may lead to the death of the animal after cessation of the narcosis and apparent recovery.

4. In these lethal cases, as the heart affection was found more intense, it may be assumed that it is the cause of the fatal termination.

5. In non-fatal cases the degeneration of the organs is repaired in the course of a few weeks (seen in a young dog from the same litter).

6. Weakening influences, hunger, loss of blood, etc., favor the appearance of the changes; in strong and young animals they less frequently appear.

7. The previous combination of morphine with the chloroform used in narcosis diminishes the amount necessary, and hence the changes consequent. With ether, these changes are not to be observed in any prominence, yet with pure ether a complete narcosis is scarcely obtainable.

8. Other varieties of animals, cats and rabbits, show deviations in this direction from those of the dog, which observations warn one to be cautious in using chloroform upon men. P. AND P.

Influence of Natrum Sulphuricum upon the Blood and Urine.—Lawadzki examined the blood and urine of persons after giving a solution (20 per cent.) of Natrum sulphuricum, and came to the following conclusions:

1. The number of the red corpuscles increased in 1 c.mm. of blood 25 to 65 per cent. 2. The amount of hæmatoglobulin increased 2.5 to 5 per cent. 3. The specific gravity of the blood increased from 1.05778 to 1.07808, hence greater than in cholera. 4. The analysis of the blood showed that this increase of blood-corpuscles of the hæmatoglobulin and the specific gravity is dependent upon a loss of water from the blood; the loss amounted to 1.30–3.45 per cent. 5. The amount of inorganic combinations in the blood (salts) fell 10 to 50 per cent.; on the contrary the amount of albuminoids increased and kept pace with the loss of water. 6. The arterial blood-pressure fell quite distinctly upon administering Natrum sulphuricum, not from its immediate cardiac action, but from a concentration of the blood. 7. The amount of urine, as well as that of urea and the chlorides, become less. Hence he concludes the action of Natrum sulphuricum to depend upon a transudation of water from the blood into the intestines. The intestinal glandular secretion is increased, as the chemical analysis of the intestinal contents has shown.—*Gaz. Lekarska*, 8, 51–52, 1888.

Fluorhydrate of Sodium.—Dr. O. Hewelke investigated the action of Sodium fluorhydrate. A 2 to 2.5 per cent. solution injected subcutaneously given per os or intravenously. Only small doses of 0.02 to 0.03 were given subcutaneously. There was violent pain. In some dogs a slight trembling was observed. The next day the skin reddened at the place of injection; there formed an infiltration whose centre was covered after three or four days with a round, necrotic scab, which separated and left an ulcerous surface.

Introduced into the stomach by a sound—0.04–0.05 to 1 kilo weight—these were: Salivation, vomiting, restlessness, trembling, with consequent depression. After two to three hours the animal recovered. Doses of 0.1 to 1 kg. weight were lethal. Pulse and respiration were first accelerated, then slowed and finally ceased. All the

dogs placed themselves into a characteristic depressed and immovable position; the refluxes were lowered. After one to one and a half hours, paralysis of the hinder extremities, and death finally made its appearance.

Upon *post-mortem* examination the pyloric extremity of the stomach, as well as the duodenum, were strongly eroded and hyperæmic. The ileum and colon were unchanged. Heart strongly contracted. The intravenous injections presented the same picture. —*Gaz. Lekarska*, 9, 12, 1889. P. AND P.

Filix Mas—*Poisoning by.*—Dr. M. Freyer, of Hetline, reviews the rare cases of poisoning by Filix mas, and finally finds it to cause violent stomach symptoms, and especially symptoms of the central nervous system: Great feeling of weakness, vertigo, confusion, stupor, coma, trembling, cramp-like feelings in the hands and feet, amaurosis and immobility of the pupil. Pathologico-anatomically there were no signs, except a general venous congestion. (*Therapeut. Monatschafte*, 3, 3, 1889.) (A case of his, a child of two years and nine months, received 8.0 grains extract Filicis maris in five hours, and died somnolent, with spasmodic symptoms, within twenty-four hours.) Dr. Boyer attended a woman who took 17.0 grains extract Filicis maris æther and the same quantity of extract pumicæ granate in gelatine capsules. A part of the Tænia solium passed away, but violent vomiting and diarrhœa appeared directly after the first 3 capsules and the woman became worse and worse. Towards evening she fell into a soporific condition, in which she lay thirty hours; awakening, her left eye was blind, and the right eye had lost some of its acuteness of vision. Confinement in the dark led to perception of light, after forty-eight hours, by the left eye and recovery took place.—*Prager Med. Wochenschr.*, 13, 41, 1888.

Phosphorus—*Chronic Interstitial Hepatitis.*—Dr. Krönig has experimented upon young dogs, giving them small and increasing doses of Phosphorus for quite awhile, and then killing them at various times. His results were as follows: The poison circulating in the blood first influences harmfully the cellular elements. The nutritive disturbances from the poison in the vessel-walls are seen from the hyaline swelling of the membranes and of the epithelial covering. At the same time, or somewhat later, the stellate cells and the real liver parenchyma are attacked, and more or less distinct necrosis of the protoplasm and nuclei takes place. After more or less time, finally there develop reactive processes at the periphery, consisting of a cellular hyperplasia of the interstitial tissue. The secondary nature of this proliferative process is seen from injected specimens, and, secondly, in specimens in which already distinct *cellular necrosis, but never proliferative processes, are observed.*

The proliferation itself is, as Ackermann observes, not inflammatory. That a similar mode of originating is to be assumed in other forms of scirrhosis, Krönig will not agree to, for alcoholic scirrhosis begins at the periphery of the acini, and is based upon an inflammatory condition.

Nitro-benzole—*Poisoning by.*—Dr. A. Nieden reports a case of poisoning by Nitro-benzole in which ocular symptoms appear: A workman, working but a few months in Roburite (Nitro-benzole), in a factory, fell sick, together with several others, with the well-known symptoms often seen in those working in explosives, but his symptoms were so violent as to force him to give up his work.

He had the appearance of one suffering from a most grave heart and lung disease. The face and mucous membranes of the lips were deeply cyanotic; the conjunctival veins of the ball of the eye were livid, ecstatic, very much convoluted, and curved; radial pulse, thread-like, and 148 per minute. A peculiar bitter-almond-like odor was perceptible upon approaching the patient. The mucous membrane had a deeply-dark discoloration. The heart and lungs showed, however, no organic changes.

Examination of the eyes showed good but slow papillary reaction. The retina and papilla showed much venous hyperæmia, and a weak filling of the arterial tubes. The boundaries of the papilla were sharp; on the lower venous branches there was an exudate. The acuity of vision was $\frac{11}{100}$ths; the peripheral vision was decreased; the limits for white were limited; the field of vision for colors was also narrowed, so that the borders for green and red were more prominent than those of blue.

Strong heart-tonics caused the case to progress and end well, yet the vision did not return so soon. Not until the fourth week after the patient again began to feel well, did the vision improve and the field enlarge.

In the factory where this case was noticed, 78 per cent. of the workmen were attacked. Frequent symptoms were: Cerebral symptoms, as disturbances in co-ordination; a staggering gait; a confused speech; convulsions and trismus—these are indicative of the grave forms. The ocular symptoms were but little prominent, yet dilation of the pupil and mystogrenes may also be mentioned. The symptoms resemble those of Aniline poisoning, and it is supposed and assumed that the Nitro-benzole is changed into Aniline in the body.—*Central. Bl. f. d. ge. Therapie*, March, 1889.

Fluoride of Sodium—*Its Action.*—It acts upon the central nervous system; as a paralyzant upon the brain, spinal cord, and finally upon the peripheral nerves, as a consequence of paralysis of the

nerve-centres for the vessels, according to Tappeiner. Excitation of the striped musculature; trembling; subsultus tendinum and spasmodic muscle jerks; finally, paralysis, with rigidity of the muscle substance; dyspnœa (paralysis of the vaso-motor centre, according to Tappeiner). The heart pulsated in warm-blooded animals even after death. There is, characteristically, a profuse secretion of saliva and tears (uninfluenced by Atropine), albuminuria. The long-continued administration of the remedy in small doses gave no results.—Tappeiner and Schultz, *Central. Bl. f. d. ge. Therapie*, April, 1889.

Digitoxine and Phlegmonous Inflammation.—In 1875, Koppe observed that Digitoxine, given subcutaneously in dogs, even in the smallest doses (0.1 milligramme), would sometimes produce *phlegmonous inflammation with consequent suppuration.* Kaufmann has sought to solve the question whether the remedy caused it or whether it came from bacteria introduced, and found that *every time after the subcutaneous injection of Digitoxine, phlegmonous inflammation took place*, in most cases followed by suppuration, while they were both kept aseptic and free from bacteria.—*Fortschritte der Medicin*, Bd. 7, 1889.

Cystisine, Cornutine and Sclerotic Acid—*Their Action on the Circulation.*—Streng has made investigations in Riegel's Klinik with Cystisine (first described by von Kraepelin). He injected it subcutaneously and applied the sphygmograph directly to the radial artery, thus obtaining the pulse curve. Cystisinum nitricum in small doses, from 0.003 to 0.004, subcutaneously injected, was completely inactive. Even a dose of 0.006 had not the slightest influence upon the form of the pulse-curve.

Experiments with Cornutine were interesting. No doubt, it has a vessel-contracting and pulse-slowing property in small doses, even in such small doses as 0.0025 to 0.005 (aqueous solution). Given by the mouth, the remedy has the same action, only that somewhat larger doses are necessary.

As regards the action of Sclerotic acid, he could never perceive the slightest increase in tension of the arteries, although for five consecutive days 1.0 gramme was given per os in an aqueous solution. Once the remedy was given subcutaneously, but, in spite of all precautions, violent local pains with great fever appeared, with no action upon the vessel-tension.—*Centralblatt für Gynælkol.*, 49, 1888.

P. AND P.

Changes in the Spinal Cord of Man After Acute Arsenical Poisoning.—Prof. Paphow examined the spinal cord of a man who died two days after poisoning by Arsenic, and found changes denoting an *acute myelitis.* The large and small vessels, especially

the veins, were dilated and filled with blood-corpuscles. Near a few vessels, more often in the cervical and dorsal regions of the cord, near the central canal, further in the posterior horns and in the side offshoots, there were numerous suffusions of blood of various sizes. In the vicinity of the cervical enlargement, besides these effusions, there were, near the central veins, masses of plastic exudates, with which the tissues surrounding the central canal were infiltrated. Cells were often visible, especially in the posterior horn, which protoplasm was turgid without a visible nucleus of a roundish form, and robbed entirely of nearly or all their processes.—*Virchow's Archiv.*, Bd., 63, 2, 1888.

Chronic Tea-Poisoning.—S. Smirnow describes the symptom-complex of chronic tea-poisoning in professional tea-tasters. A strong infusion of tea is made and tasted, but not swallowed, in order to test the tea. These tests are made 150 to 200 times daily, resulting in a gradual poisoning. There is a sharpening of the taste and smell, gradually giving way to a dulness of the same. The digestive canal is irregular in its functions, the appetite and nutrition of the body decreased; the liver enlarges at first, then becomes painful, and passes gradually into a condition of atrophic scirrhosis; the nervous activity is weakened, the mind depressed, the sight weak, and sometimes there is diplopia; the skin has a dry feel, becomes yellowish and of a parchment color; there are periodic pains in the region of the stomach. After two to three weeks they must give up their business for awhile.

Smirnow has found this to have a hindering action upon the course of constitutional syphilis, it diminishing also the receptibility for Mercury.—*Med. Obosrenie*, 28, 21.

On the Action of Cantharidine upon the Renal Epithelium.—Cornil and Toupet have investigated the histological changes in the kidney after poisoning by Cantharidine. In very acute poisonings of rabbits or Guinea pigs (fatal within a few hours), the glomeruli were strongly contracted, Bowman's capsules were half filled with a nucleated exudate, in which the epithelial covering of the glomerulus convolutions may be recognized, they having separated in shreds. The epithelium of Bowman's capsule was nearly intact. That of contorted uriniferous tubes appeared, on the contrary, granulated, opaque, full of small empty spaces. Indirect divisions of the nuclei and Karyo-Kenetic figures were only to be found after several days' (five) poisoning, where the drug was often repeated in small doses.

Four days later, the changes in the glomeruli were nearly all repaired. The neck of the uriniferous tube at the constricted por-

tion, where the tubulus contortus is attached to Bowman's capsule, was no longer distinct. Karyo-Kenetic figures were still to be found in the chronic cases of cantharidial poisoning eight days after, and especially were they prominent in the tubuli contorti, but not in every place had the epithelium undergone such changes. Some parts of the kidney appear to have been attacked by the poison, while others, on the contrary, were apparently spared.—*Arch. de Physiologie*, 19, 5 pp., 71. P. AND P.

The Cumulative Property of Bromide of Potassium.—M. M. Doyon has published, in the *Lyon Medical*, a note relative to the cumulative property of Bromide of potassium. His inquiries in this regard were made upon a young epileptic child, age not stated, to whom the drug had been extensively administered for a year. The child succumbed during an attack of scarlet fever. Nothing special was found at the autopsy, but the brain and liver were submitted to chemical analysis. The result showed that the former contained 2 grammes of the drug, and the latter 0.72 centigrammes. Thus, as might be expected, the central nervous system was more largely charged with the drug than any other part.

Sodium Ethylate for the Removal of Superfluous Hair.—In the August number (1889) of *The Practitioner* are given two photographs, one showing a baby with forehead half covered with hair, and the other showing the same child 5 or 6 years old, and with only the slightest trace of hypertrichosis. The case was treated with Sodium ethylate, and Dr. Jamison, the author, relates another case illustrative of the use of that agent in hairy moles on the face:

Miss P., æt. 25, had a hairy mole, about the size of a six-penny piece, on right cheek, near angle of jaw. Long, coarse hair grew from it, and the skin was rough and dark brown. The hair was cut off as closely as possible with a very fine pair of scissors, and the mole was then painted over with Sodium ethylate, a fine glass rod being used. When the mole had a varnished look, the Ethylate was gently rubbed in with the glass rod to make it penetrate more deeply into the hair follicles. Every care was taken not to let any run on the sound skin of the face. The mole had quite a black look when the little operation was over. A hard crust formed over it, which was nearly three weeks in becoming detached. When it came off the hair was seen to be destroyed, and the surface of the mole had a smooth somewhat cicatricial appearance, of a much lighter color than before. This has become much smaller in size and less noticeable, though there is still a slight mark less than a threepenny-piece in size, and hardly perceptible. The patient says that her doctor notices the mark more than any one else.

Dr. Jamison adds that "in those vascular areas seen on the sides of the nose in children, formed by vessels radiating from a common centre, a very small drop of the Ethylate, applied with a fine glass point to the very middle of the vascular area, destroys or obliterates the vessel below (*i.e.*, beneath), and then those radiating from it disappear, and no mark at all is left.

No remark as to the pain of the applications is made, except the statement that "by the time the child had slept off the effects of the *Chloroform* the pain of the application had ceased."

Æsculus Glabra—*An Involuntary Proving—fragmentary*.—A gentleman, 35 years of age, was riding along and stopped at a buckeye tree, cut open a green buckeye and smelled of it. There was a sudden irritation of the throat, a sensation of a feather tickling the throat, which caused him to cough, hack, and raise mucus—finally streaked with blood. The effect gradually wore off in an hour or so. The gentleman was very temperate, used no tobacco, tea, coffee, etc., and this fragment is of interest as it is a straw pointing towards a confirmation of the *winter cough* among the Items of Interest in the RECORDER of September, 1889, p. 237.—*Dr. F. Pritchard.* (Communicated.)

Coffee-Poisoning.—A woman, 25 years of age, unaccustomed to drink coffee, drank at one time ten cups of strong coffee, which was followed two hours after by *vomiting, vertigo, sensation of anxiety, coolness of extremities and trembling of the fingers.* The pulse was increased, but not quantitatively changed. Warm drinks and Ether were given internally, she was rubbed off with hot water, and, finally, morphine was injected subcutaneously; sleep appeared, and the next morning she was well.—Dr. Glogauer (Berlin), in *Allg. Hom. Zeit.*, 8, 1889.

Basedow's Disease Cured by Pregnancy.—A servant girl, 27 years old, suffering for the last seventeen years from *chorea*, observed since February, 1884, palpitation of the heart, præcordial pains, which extended to the left shoulder and an increase of the circumference of the neck, accompanied by a slight paresis of the legs. A transient improvement followed the use of Arsenic, cold douches, etc. In October, 1887, her condition was deplorable: she was bedridden, had complete paralysis of the lower extremities, a high degree of exophthalmic goitre, palpitation of the heart, præcordial anxiety, anorexia, emaciation, nystagums, etc. As the writer saw her again in February, 1888, a marked improvement was noticed. The symptoms of Basedow's disease had nearly disappeared, as well as the paralysis of the legs. The patient dated the improvement

since the beginning of a pregnancy, which then had reached the fifth month, and hence the improvement must be connected with the pregnancy.

Pregnancy could not have had a psychic influence, as the girl became pregnant irregularly, she not being married, and for this suffered many reproaches from her mother.—Dr. Souza-Leite (Paris), in *Centr. Bl. für Gynæcol.*, No. 1, 1889.

Histerionica Baylahuen—*Therapeutic Properties.*—M. le Dr. Baillé has made a study of this plant, sent to Dujardin-Beaumetz by M. Cervello, a physician of Valparaiso.

Histerionica is a member of the compositæ, in which the most striking pecularity consists of a resinous exudation, yellow and odorous, obtained from all parts of the plant. It is employed in infusion, tincture and alcoholic extract.

M. Baillé has studied its action upon the lungs, digestive tract, kidneys and the bladder.

I. *Action upon the Lungs.*—He mentions the salutary effects of the remedy in chronic inflammation of the lung. Two patients of Dujardin-Beaumetz, suffering from chronic bronchitis, received Histerionica ⁰ 20 gtts. at a dose. After six days of this treatment the expectoration, which was abundant, diminished quite notably; the sputa, thick and yellowish the first few days, thinned and became less frequent, and the suffocation, so frequent at the beginning, disappeared entirely. It seems to act like Tar terebinthina or Copaiba, but with the difference that it is much better borne by the patients than these balsams, and does not cause cramps of the stomach nor renal congestion.

II. *Action upon the Digestive Tract.*—From several observations, collected from different clinicians, it may be considered as an excellent anti-diarrhœtic, it seeming to modify the condition of the mucous membrane of the intestine, acting at the same time as an antiseptic. In unmanageable diarrhœa, where Opium or Bismuth produces no amelioration, it shows very good effects. But it is especially in the diarrhœas of phthisical patients where the writer has noted the best results, for he says the remedy has here not failed him once.

III. *Action upon the Genito-Urinary Tract.*—Given mostly in patients suffering from cystitis. The urine is not increased, but the bad odor of the urine is much diminished, micturition becomes less frequent and less painful.

IV. *Ulcers.*—Histerionica upon pledgets of cotton, applied as a dressing to ulcers, quite promptly and beneficially modifies them. The alcohol evaporating leaves a resinous deposit, which covers the entire ulcer with a slight film, preventing contact with the air

and making cicatrization more easy. It is especially as an anti-diarrhœtic that the plant should attract the attention of physicians, and the excellent results obtained in the diarrhœa of tuberculous patients should lead to its employment.—*L'Art Medicale*, May, 1889.

Vernoina Nigritiana.—Häckel and Schlagdenhuffen (*Arch. d. Phys.*, xx., 1888) describe an East African root which is used by the natives as a febrifuge and an anti-dysenteric, and compare its action to that of Digitalis. The bushy root has a nauseous taste, somewhat resembling that of Ipecacuanha, and in a fresh condition has a bitter taste as well. A glucoside has been found in the root and termed *Vernonin*.

Action upon the Circulation.—Decrease of heart-beat (in frogs) after injection of a watery solution of 0.02 gm. after a few minutes. After again rising somewhat, the heart-beat falls off from 36 to 32 a minute. After 3 cgms. the phenomena became stronger, and the number of beats diminished about one-third. The heart had to make an effort to empty itself, and after the contraction the blood flows very slowly into the auricles. After 0.04 gm. to 0.09 gm., these phenomena become more violent, the heart remains finally in systole, and death follows in eight hours.

A dove, into which 0.05 gm. *Vernonin* was injected into the heart region, was apparently not affected, nor even on doubling the dose; but after injection of 0.150 gm. the animal became indifferent, lost its appetite, and was found dead the next morning with its head upon its breast. Its heart had stopped in systole. Another dove, after injection of 0.250 gm. died in twelve hours with the same phenomena. Hence *Vernonin* acts similarly to Digitaline, Strophanthus, and Convallaria, but in comparison with Digitaline it is eighty times weaker (in frogs).

Vernonin paralyzes the motor nerves but not the muscles in frogs; a similar action in mammalia. A rabbit, weighing 1.1 kilos., into which was injected 20 gms. *Vernonin* in the right femoral region, and 1 to 2 mgs. under the skin, the ventricles ceased to act, though the auricles continued to contract ten to fifteen minutes after.

Nux Vomica—*Poisoning.*—J. Venkata Swamy, L.M.S., of the Aska Dispensary, records a case of poisoning by *Nux vomica* in the crude form. An adult male was brought to the dispensary at 7.30 A.M. on the 17th February, 1889, with giddiness; numbness in the trunk, and more markedly in the lower extremities; dryness of throat; slight injection of the conjunctivæ; heaviness of head; occasional backward jerking of the head, sometimes developing into a flying fit of opisthotonos whilst he was taking, or on the point of taking, medicines; consciousness perfect; respirations 16 per minute and unaltered in quality; pulse slightly frequent; weakness of

voice; confusion, as in alcoholic inebriation; and facial features generally indicative of fear and despair. It appeared that the patient had suffered from gonorrhœa, and was advised by a friend to take the root of *Nux vomica*, well ground, with equal parts of sugar and black pepper, and made into a mixture with water. The exact quantity of the root taken could not be made out. He had swallowed the medicine at 7 A.M., and first observed the symptoms half an hour after. The spasms of the back were brought on by attempts to swallow medicines, more powerful efforts in other directions being found to produce no effect of the kind. The muscles of the lower jaw and the pupils were unaffected. The patient suffered severely from painful muscular cramps in his legs, which were afterwards as tender as a suppurating abscess, though the cramps continued for not more than two hours. An interesting feature of the case is the fact that swallowing of medicines, or even the mere idea of medicine, excited spasms of the muscles of the back. The patient often withdrew, as if shocked, from the medicine, asserting that the sight of a glass of medicine simply recalled to his memory the poisonous dose he had taken. The mental excitement caused by the sudden flashes of memory of the toxic medicine probably served to produce spasms through the already irritated and unstable nervous centres of the spinal cord.—*The Practitioner*, July.

Sugar—*New Urinary Test for*.—A new reagent for detecting sugar in urine has been found in Safranine, which is said to possess the advantage of not being decolorized by Uric acid, Creatinine, Chloral, Chloroform, Peroxide of hydrogen, or the salts of Hydroxylamine, all of which reduce Fehling's solution. Albumen, however, does decolorize it. The process recommended is to boil 1 c.c. of the urine with 5 c.c. of a solution of Safranine of the strength of 1 in 1000, and 2 c.c. of a solution of Caustic potash. If decolorization is effected, the urine is diabetic, normal urine containing too little sugar to decolorize completely so much of the re-agent. Chloral and Chloroform do attenuate the red color of the Safranine, but never completely destroy it.—*Prov. Med. Jour.*, July, 1889.

Snake-Bite Treated by Strychnine.—Dr. A. Müller, in a letter to Ferd. v. Müller (Baron), mentions *Strychnine as a remedy against snake bites, which has been used with success.* He used Strychnine, as it acts specifically upon the central portions of the nervous system, which regulate and preside over muscle action and movement.—Virchow's *Archiv.*, cxiii. 2, p. 393, 1888.

Aconitine in Neuralgia.—Dr. Alfred Cohn has made hypodermic injections of Aconitine nitrate ($\frac{1}{100}$ to $\frac{1}{10}$ mg.) in neuralgia, sciatica and facial neuralgia with good results. The experiments were made in Prof. Mandel's clinic.—*Neural. Centralblatt*, 23, 1888.

VETERINARY DEPARTMENT.

Emphysema—*Equine.*—August 20, 1889, I was called to C—— by Herr B. K. to see a sick horse. August 18th, during the night, the horse ran with full speed against the iron strap of a half-open door, the strap being about 10 cm. long. The iron cut the breast strap through, and the horse, apparently uninjured, went home, a distance of 10 km. The next day, the horse swelled up over the whole body, breathing with difficulty and noise, and did not lay itself down.

On examining, on the 20th, the skin was found to be distended with air, like a slaughtered animal blown up with a bellows by a butcher. In the pubic region there were two large air-bladders the size of a goose egg; on the breast and on the neck a swelling the size of an egg and fluctuant, otherwise no injury or tumor upon the whole body. The breathing was labored, noisy and snorting; in the nostrils there was dried blood; pulse and heart-beat were imperceptible with the great distention; temperature, 38° C.; appetite, urine and fæces normal; gait stiff and staggering. The tumor, punctured with a fine trocar, yielded a bloody pus, by which was determined that no bleeding vessel was present, and an opening could be distinctly felt with the knife. This done, about ½ litre of a bloody fluid flowed out and the air streamed through the severed skin with a loud hissing, but not, however, from the opening deep in the wound visible to the eye, which, examined by a sound, showed a depth of 30 cm. and a width of 8 to 10 cm.

As even a small injury of the skin was not to be seen, the air could only pour out from an injury of the lungs, ribs or of the intercostal muscles. The dried blood in the nostrils and the noisy breathing pointed to an injury of the lungs. I then made incisions over the entire body about 20 to 30 cm. apart and about 1 cm. long, through which the air was removed, as much as possible, by pressing and rubbing. The wound in the chest was syringed out three times daily with a decoction of Arnica and Malva, and every three hours 10 drops of Arnica 1x were given the horse internally. On the 27th, the tumefaction had nearly disappeared, the wound healed to the depth of 10 cm., but the breathing remained labored and noisy. Arn. 1x and Kali carb. 3x were now given in alternation every three hours. September 6th, the wound was nearly healed to a scar, and the breathing, as well as the general condition of the patient, was normal, and on September 10th it made a journey of 50 km. without difficulty, and up to to-day is perfectly well.—C. Jenisch, in *Zeitschr. für Hom. Theirheilkunde*, 1888.

Prolapsus Vaginæ—*Bovine.*—One evening I was called to the cow of K., in B——. She had calved eight days ago, and four days after a slight pressure towards the genitals, resembling the pains of labor, appeared with *a flowing of purulent mucus from the parts.* This pressure became worse while the animal was lying down, so that prolapsus vaginæ took place, but which could be easily reduced again.

Shortly before I came, the animal had lain down, and I found the vagina prolapsed and covered with the above-mentioned slime, so that to only look at it was disgusting.

Treatment.—The prolapsus was at once reduced, the animal placed upon a high bedding, and Hepar sulph. calc. 5x given three times daily. Eight days after the animal was cured.

Another kind of prolapsus vaginæ was seen in the cow of farmer F. in M——. It had suffered since the seventh month of pregnancy from the above-mentioned trouble. After calving the prolapsus disappeared at first, but came back again four weeks later and took place, especially while lying, without any especial pressure. China 3x., a dose twice daily, cured within four days.—H. Feldmann in *Ztschr. für Hom. Thierheilkunde*, 11, 1889.

Colic—*Bovine.*—The cow of Sch. of L——, well during the evening, was found the next morning with the following symptoms, which would lead one to think of colic: The animal scraped the fore and pawed with the hind feet, laid anxiously down, rolled around on the ground, groaned and stretched its head out, and then looked anxiously towards its belly, etc. These symptoms came in violent attacks, followed by intervals of ease. The fæces were passed in sufficient quantity the night before, and the belly was not distended.

Colocynth 3x, two doses within ten minutes, removed the pains at once. An hour later the animal was bright and showed a good appetite, which, of course, was but scantily satisfied.—H. Feldmann, in *Ztschr. für Hom. Thierheilkunde*, 11, 1889.

Catarrh—*Psittine.*—Frau von C—— besought me to visit her, as her little favorite, Jocko, a magnificent parrot, was sick. On my coming to the house, I found the parrot sitting very disconsolately upon the perch of his beautiful cage, showing no signs of recognition to the call of his mistress, nor would he take his favorite food; he didn't speak, but kept up a snoring noise.

On examining the bird, there developed the symptoms of a very obstinate catarrh, in which, as often is seen in such cases. the nostrils were much stopped up apparently, so that breathing for the animal was difficult. Other veterinary physicians had prescribed vapor-

baths, the cage with the bird being placed upon a cane-bottomed chair, and the cage covered with a cloth. Then a vessel with steaming Chamomilla tea was placed under the chair, and the bird was to breathe the vapor. The procedure failed, however, for the bird had such attacks of suffocation that it scarcely escaped with its life. I gave the poor patient Dulc. 6x and Hepar sulph. calc. 6x in alteration of each, four pellets twice daily, and had the nose-openings touched with a feather dipped into almond oil, so that the tenacious mucus might loosen. After three days I had the pleasure of seeing the lady come to meet me at my visit with great joy. She reported to me that Jocko was the same old rogue as ever, and as I neared him in his cage he thanked me with a loud "Guten morgen!" and that there be no mistake as to his thankfulness, he cried out: "Danke schön!" The bird was, to the joy of his mistress, completely cured.—H. Fischer, in *Ztschr. für Hom. Thierheilkunde*, 12, 1889.

Hæmaturia—*Equine.*—Cures by homœopathic remedies are very often criticised and mocked at, even denied, by our colleagues of the old school; but yet, when they observe their action, they cannot deny it. It is again quite often that allopathic remedies have been heroically used before the homœopathic treatment is demanded, without any improvement. I will give my readers an example:

A landlord, having heard of the successes of homœopathy, asked me for advice as to a horse of his, which for the last three years had passed bloody urine, seemed at the same time much exhausted and, what was worse, to keep on losing strength. His veterinary adviser had used many remedies for the condition, in vain, however, and knew of nothing to help it. Again the animal had been growing no better, but on the contrary worse, and getting weaker and weaker. The cause he could not determine, and sought me to help him, if I could. I sent him Cantharis 3x, and had the horse take 10 drops three times daily upon wafers. After eight days I heard from him that the appetite of the animal had returned, and, after about ten days, that the horse was completely well; the urine was normal, as in other horses, and the strength of the animal increased daily.

On another occasion, I took the opportunity of visiting the gentleman, and heard from another person, as well as the gentleman himself, that the animal was very lively, and that it had become an entirely different horse after its recovery, only the landlord feared the disease, which had disappeared in such a wonderful manner, would return again. Also his veterinary medical friend, who accidentally came up then, was astonished at the action of the remedy, and congratulated him upon the animal's recovery.

The disease did not return, but the animal, on the contrary, is very lively and well, and enjoys full strength.—H. Fischer, in *Ztschr. für Hom. Thierheilkunde*, 12, 1889. P. AND P.

Cures of Animals with High Potencies.—In the May RECORDER, page 130, a number of cases of animals cured with a single dose of various remedies in the 200th potency were given. These cases of Dr. Bœnninghausen are very interesting, and as they show the action of remedies in a large field of diseases, we have decided to finish his list, crowded out of that edition:

14. Nettmann's *horse*, had July 11, 1862, one dose of *Thuja* for *worms* and since then has been well. March 10th of this year, 1863, the disease reappeared: SULPH. cured.

15. March 11th. Lülf's *horse*—for two months has been *asthmatic with cough*, and is of a very fiery temperament, NUX VOM. March 24th, cough very much improved, but the *asthma*, though less, still remains, *Ars.* April 5th, the *cough* has reappeared, worse during rest and after eating. PULS. April 28th, cough now worse in the morning. NUX VOM. May 23d, much improved, but the cough still persists, with much mucus from the nose, *Puls.* June 2d, cough is less, but the nasal mucus, which now excoriates, is increased: ARS. cured.

16. March 14th. Samson's *seven-year-old horse—asthmatic, Ars.* April 3d, much better, and only upon beginning to go is it noticed: THUJA cured.

17. March 24th. Lülf's *mare*—for a couple of years in the spring *itching* with *loss of hair, Sulph.* April 28th, was better, but begins again, *Thuja.* May 23d, this time *not improved* by *Thuja* and bothered much by flies, *Sulph.* June 2d, this time also no result, and it bleeds upon scratching: *Merc.* finally cured.

18. March 26th. Stroband's *cow*—after calving violent (milk-?) fever with stoppage of flow of milk and trembling, 1. *Acon.*, 2. *Chamom.*, every six hours. March 27th, milk has returned, but now the whole body is paralyzed, so that it can neither stand nor eat: *Puls.*, the next day, completely cured.

19. April 11th. Heissing's *horse—Soriasis: Hell.* cured.

20. April 25th. Borgert's *gelding—staggers*, only while in the stable, with *trembling: Puls.* cured.

21. May 27th. Kiesekamp's *horse—inflammation* of the left eye: 1. *Arn.*, 2 *Bell.*, every two days, cured.

22. Gr. Schürmann's *horse*—again *asthmatic*, after being cured last year, July 26th, with *Nux vom.* and August 19th, *Bry.*, now May 16th, which July 25th it was necessary to repeat. Since then well.

23. Waltermann's *mare*, October 10, 1862, cured by *Sulph.* of an old eruption in a *mane* and *tail*, which May 17th reappeared: *Sulph.* cured.

24. May 19th. Cildeg's *cow—retention of urine* after *difficult calving, Arn.* May 21st, now diarrhœa and a tumor of the abdomen: *Sulph.* cured.

25. May 21st. Frhr. v. Twickel's *mare—paralysis* after being wet through while sweating (and already treated a few weeks according to Günther's directions and with Günther's remedies), *Rhus.* May 26th, without success, on beginning to go aggravation of the paralysis, *Ars.* June 21st, much better, but still some paralysis on beginning and after motion: *Ars.* cured.

26 May 21st. Hölling's *cow*—calved fourteen days ago, and since then has been lame and does not eat: *Puls.* cured.

27. May 29th. Wolmer's *mare*—itching in the mane and tail: *Sep.* cured.

28. May 29th to June 3d. Several animals, *horses, cows* and *pigs*—bitten by a *mad dog:* 1. *Bell.*, 2. *Hyosc.*, every 5 days, remained healthy.

29. June 5th. Bolten's one-year-old *bullock—hæmaturia*: 1. *Ipec.*, 2. *Nux vom.*, every 24 hours, cured.

30. June 9th. Stegenmüller's *cow—constipated, distended* and entirely *paralyzed* (given up by the veterinary surgeons): 1. *Nux vom.*, 2. *Puls.*, every 12 hours. June 10th, improved, but *great prolapsus of the rectum:* 1. *Ignat.*, 2. *Nux vom.*, every 12 hours, cured.

31. June 10th. Milte's *mare—asthma* and *cough* (from a remedy given by the veterinary surgeon), *Ars.* June 27th, apparent improvement, but worse again, *Thuja.* July 9th, almost entirely recovered, but still cough: *Ars.* cured.

32. June 16th. Schening's *four young pigs—gangrene*, 1. *Ran. scel.*, 2. *Spong.*, 3. *Ars.*, every 4 days. July 9th, very much improved: *Ran. scel.*, 2. *Sulph.*, cured.

33. June 17th. Hermann's bullock—first hæmaturia and now obstinate constipation, *Nux vom.* *June 18th*, now black and green stool, but appetite returned: 1. *Ipec.*, 2. *Nux vom.*, every 12 hours, cured.

34. June 20th. Boschert's *three cows* and *one calf*—bitten by a *mad cat:* to each animal, 1., 3. *Bell.*, 2. *Hyosc.*, nothing followed and they remained healthy.

35. June 27th. Hermann's *cow—hæmaturia* since this morning: 1. *Ipec.*, 2. *Nux vom.*, every 12 hours, cured.

36. July 1st. General von Hobe's *riding-horse*—for ten weeks his right foot splayed and treated by several veterinary surgeons without success, *Ars.* July 26th, much better, and is only noticed to be lame when trotting on paved and hard roads, *Ars.* August 11th, as good as cured, as a precaution, *Thuja.*

37. Leppermann's *cow—malignant disease of the mouth and feet:* 1. *Ars.*, 2 *Thuja*, every 3 days, completely cured. (Last year several similar cases occured, which were cured in the same manner.)

Round Ulcer of Stomach in Cattle.—The ulcers, pepticum and rotumdem, has but rarely been observed in animals up to date. Hence it is interesting to know that, as it seems, it is not rare in calves, as Ostertog had an opportunity of observing six calves slaughtered at the Berlin central abattoir, in calves from six weeks to one year old. The description leaves no doubt that the condition in question is that of a typical ulcer of the stomach; two cases had progressed to perforation. No cause can be assigned.—*Dutsche Zeitschr. fiir Theirmed*, 14, 45.

BOOK REVIEWS.

Therapeutics of Nervous Diseases; Including also their Diagnosis and Pathology. By Charles Porter Hart, M.D. Philadelphia: F. E. Boericke. Pp. 268.

This new work, like all those bearing the *Aude* of the Hahnemann Publishing House, is a welcome addition to the library of the studious physician. Dr. Hart's work is divided into seven parts as follows: (1) Diseases of the Brain and its Membranes. (2) Diseases of the Spinal Marrow and its Membranes. (3) Cerebro-spinal Diseases. (4) Diseases of the Peripheral Nervous System. (5) Diseases of the Sympathetic Nervous System. (6) Symptomatic Diseases. (7) Mental Diseases. Under each part the diseases there classed are taken up separately as follows, *i.e.*, Cerebral Anæmia, Synonyms, Definition, Diagnosis, Pathology, Clinical Experience, Therapeutic Indications, and Auxiliary Treatment. The author particularly presents the results of careful study and painstaking research in the last three rubrics of each disease. His notes on clinical experience and his therapeutic indications are especially good.

Taken as a whole, the work is a most useful addition to our library of homœopathic practice. It is thorough without prolixity, condensed without loss of value, and presents a handy and ready reference-book to the busy physician.

PUBLISHERS' DEPARTMENT.

Each copy of this issue of the RECORDER contains a subscription blank, a convenience and a reminder to the greater number of our subscribers that Vol. IV. is closed, and subscriptions to Vol. V. are now in order.

These blanks are put in by the binder, and as some of our friends have already paid their dues for Vol. V., and a few are not due yet, it may be well to state that the hint is not for them. We trust the response will be generous, both from those who have been on the regular list of subscribers in the past, and also from others whose names have not yet adorned that galaxy. To that end, a very large extra number has been printed and mailed as samples.

We expect to make the coming volume richly worth the small subscription asked.

Latrodectus Mactans.—The July number of the RECORDER for this year was favored with a paper from the pen of that well-known writer, Dr. S. A. Jones, of Ann Arbor, Michigan, on "Latrodectus Mactans—A Suggested Remedy in Angina Pectoris." He had no clinical cases to report, or provings, nothing but a number of reports of bites by this venomous spider, collected from various sources; yet these, in the light of the great Hahnemannian law, pointed to a most useful discovery—we may say, to a great discovery.

"It is neither the aim nor the purpose of this paper," wrote Dr. Jones, "to establish the lethal property of spider poison; though I must acknowledge that, until I read the paper in *Insect Life*, I had no thought that its possession of such a property would be called in question. I shall content myself with calling attention to the pathogenetic quality of the poison of *Latrodectus mactans*, leaving my reader to discern the resemblance of its *tout ensemble* to an attack of angina pectoris, and therefore to infer its homœopathic applicability in that dread disorder. I shall not enter upon the pathology—various and much-confused—of that cardiac seizure, because, as I get older, I find the 'like' more and more of a 'pillar of cloud by day and a pillar of fire by night,' whilst in my short life I have found 'pathology' as changeable as a dying dolphin—and everyone knows that a dead fish 'stinks and shines, and shines and stinks.'"

Among the marked symptoms of the poison of *Latrodectus mactans*, we find: "Pain up arm to shoulder, thence to back of neck;" "præcordial pain extending to left axilla, and down arm to finger-ends;" "left arm almost paralyzed;" "pains up arm to shoulder,

thence to præcordia;" "apnœa;" "præcordial pain;" "pulse feeble and thready;" "skin cold;" "sense of impending dissolution," not to mention others. From the data the writer is led to believe "the poison of *Latrodectus mactans* is suggested for a trial in angina pectoris, in that its physiological action presents the closest *similimum* yet found." Again, elsewhere: "Of the changes in respiration accompanying angina pectoris, we have, then, both the general and the rarest form, produced pathogenetically by the poison of *Latrodectus mactans*." This paper reached the subscribers of the RECORDER in the latter part of July.

Early in September we received a business letter from Dr. R. H. McFarland, of Orlando, Florida, which concludes as follows: "*Latrodectus mactans* cured my only daughter, æt. 36, married, of *angina pectoris*. The RECORDER gives us some good things occasionally."

"If *Latrodectus* will cure angina pectoris," said a physician to whom we mentioned the matter, "it is worth its weight in gold." Well, *similia* plainly indicates that it *ought* to cure it, and in the only case where it was administered, it *did* cure it. *Latrodectus* is to be had in tablets 3x.

Guaiacol.—"*The sovereign of all known remedies in pulmonary tuberculosis*," is the way Dr. Nobili describes, or rather eulogizes, it in *Gazetta degli Ospitali*. *Guaiacol* is a homogeneous substance, in reality the true therapeutic agent in *Creosote*, and Dr. Nobili claims, after much experience, that it augments the power of organic resistance against tuberculous infection, and of destroying the tubercular bacilli, and can be used with marked success in the treatment of consumption. All patients treated with *Guaiacol*, he says, experienced an increase of appetite; the cough, especially at night, was decreased, and, in some cases, the fever and night-sweats were reduced. Generally a distinct improvement in the rattling sounds were noted, and the "subjective feeling of the patients was markedly elevated."

Apium Virus.—A friend sends us the copies of *Gleanings in Bee Culture*, Medina, O., from which we clip the following rather interesting correspondence:

Bee Stings a Cure for Rheumatism.—Last summer I began bee-keeping, and up till then I had been troubled with rheumatic pains; but during the time I was stung by bees I never felt any pain from rheumatism. The poison from the stings seemed to cure the complaint. Do you think there is anything in it? F. BROWN.

UTTOXETER, ENGLAND, March 20, 1889.

More Experience with Bee-Stings and Rheumatism.—At my table

when eating honey, without any other conversation leading to it, a German friend, with much animation, told the following: "After the Franco-Prussian war I suffered from rheumatism (as the effects of my soldier life) for three years, never able to work, and seldom able to walk. One fine day in spring I coaxed them to carry me into the garden, and, sitting near the bees, I smelled honey, and asked for bread and honey. The bees gathered around me, and being left alone a short time, I tried to chase them off, and they stung me awful bad on the face and arms, fifteen or twenty stings before I got away. The swelling was terrible, but before it was gone I could walk; and when it was gone I was *well*, and never had rheumatism afterward, and immediately went to work." The name of this man is Henry Karstadt. I believe his statement. J. A. LOWE.

HUTCHINSON, KAN., June 28, 1889.

Bee-Stings a Positive Cure for Rheumatism.—I have been troubled for years with rheumatism; and when punctured a few times by the bees, I found I was entirely cured. The fluid extract of bee-sting is an old eclectic cure for rheumatism. M. N. MCNEIL.

KIRKWOOD, O., June 24, 1889.

In the May 15th issue of *Gleanings*, F. Brown gives his experience with rheumatism and bee-stings, and here is mine:

About fifteen years ago I sprained one of my knees. I was lame for a few days, and it got better; but the lameness, accompanied with an ache, came again; and as time passed on it continued to come worse and worse, until it got so bad I could neither straighten my leg nor bend it up; and if by accident I did move it from just such a shape it was like biting on the nerve of a decayed tooth. The pain not only stayed at my knee, but extended above and below, and acted as if it had come to stay. I tried a magnetic battery some. I used liniment externally, and "sure cure" internally, with but little relief and no cure. Three years ago we bought five colonies of bees, and with them came the stings, and next the relief. I have not suffered as much from my knee in the whole three years as I have in some three minutes previous to the stings. I have used no other remedy within this time. I am a farmer, and my work has been very much the same.

Now, I am not going to say that bee-stings have cured my rheumatism; but if I had employed a doctor, with the understanding of no pay unless successful, I am very sure he would call for his pay. W. M. STACY.

EDGAR, CLAY CO., NEB., May 30, 1889.

Rhus Toxicodendron and Rheumatism.—A well-known and very able "regular" physician," needless to name here, has made

what he considers to be a most important discovery, and has spread it before the medical world in two long papers. That his discovery is an exceedingly valuable one and fraught with relief to sufferers no one can gainsay—especially no homœopathic physician. The Doctor says he gave free samples of the "new medicine" (*i.e.*, *Rhus toxicodendron*) to the members of the medical profession in various parts of the country, "with instructions for use, and at the same time requested that within a reasonable period they would advise him of the results of the treatment which might come under their observation." As usual, many of the doctors made no sign, which leads the writer to say, and us to italicize it, that, "there seems to be considerable diffidence in giving an opinion concerning a remedy *which is altogether new* and is given in such small doses as *Rhus toxicodendron*." That the remedy is altogether new to the Doctor, and to those of his colleagues who, like him, have said so, there is not the slightest reason to doubt, but because a remedy is altogether new to them, it by no means follows that it is altogether a new remedy, and a little wider reading would have prevented the publishing of papers—excellent in themselves—which contain statements not altogether free from the ludicrous; for while, as we intimated before, *Rhus toxicodendron* may be new to the writer, it is nevertheless well-known, and freely used, by not less than twelve thousand physicians in the United States alone. Furthermore, he will find this remedy fully dwelt upon in every book of general homœopathic practice, from Hahnemann's *Materia Medica Pura* down to the latest issued—*Allen's Hand-Book of Materia Medica;* he writes as though the discovery of *Rhus toxicodendron* as a remedy for "sciatic rheumatism, muscular rheumatism so-called, and varicose veins," etc., were something new. Turning to Hughes's *Pharmacodynamics* we read: "*Rhus* has thus come to occupy a high place in homœopathic therapeutics amongst the remedies for rheumatism." Again: "Its undoubted value in rheumatic sciatica depends, I take it, upon its influence on the fibrous sheath of the nerve," etc. The book from which the foregoing is quoted was published in 1867. In the *Lesser Writings* of Hahnemann will be found mention of 183 cases of epidemic fever treated by him with *Rhus toxicodendron*, in the year 1813, without a single death. He also used it largely for rheumatism.

These two papers are singularly confirmatory of the accuracy of homœopathic text-books. In the reports of cases by his correspondents, it will be noticed that they say the remedy has no effect in neuralgia; Hughes said of *Rhus* twenty-two years ago: "It is powerless in pure neuralgia here or elsewhere." It is useless to quote more to prove that *Rhus toxicodendron* is not "a remedy which is altogether new," as the Doctor claims. As he and his confreres are confessedly in the experimental stage with this remedy, we would

hint that 5 drops of a tincture, made as the one they use is made, is entirely too strong for a dose, and much better results could be obtained by using the regularly prepared homœopathic dilutions, or tablets, of this remedy—say the 3x. They can purchase these at any reliable homœopathic pharmacy, and in any strength desired, and prepared in a better manner than they can do it, to say nothing of the risk they run in handling this poisonous plant. We would also call their attention to the fact that there are several varieties of *Rhus*. In the *Physician's Price Current* of Messrs. Boericke & Tafel (which, by the way, is a very complete work, and is mailed free to physicians) we find in the list of medicines, *Rhus aromatica*, *Rhus Californica*, *Rhus glabra*, *Rhus radicans*, *Rhus toxicodendron* and *Rhus venenata*.

There is more in HOMŒOPATHY, gentlemen, than is dreamed of in your philosophy.

Pharmacodynamics.—Dr. Hughes's *Manual of Pharmacodynamics* has been pronounced by a gentleman, who has had many years experience in supplying physicians with books, to be the favorite, by all odds, of physicians of other schools (and of a great many homœopaths, too) who wish to get an insight into homœopathic treatment. The present edition, the fifth (1886), has grown to 962 pages, consisting of 60 chapters, together with an "Appendix," "Index of Medicines," and "Clinical Index." Two chapters are given to "Sources of the Homœopathic Materia Medica," two to "The General Principles of Drug-Action," one to "Homœopathy—What it is," one to "Homœopathic Posology," and the remainder to the leading remedies homœopathically administered. Doubtless what makes the work so popular with physicians who have not been graduated from a homœopathic college is the absence of those long lists of symptoms, which to the life student are so vital, but to one who has not the time, so confusing. Take by way of illustration *Arnica montana;* Hahnemann's *Reine arznermittellehre*, in the chapter on this remedy, gives 638 symptoms. Hughes's chapter on *Arnica* takes seven pages, and the following extract will give a fair idea of the way the remedy is treated.

"I have said that *Arnica* is to an injury what *Aconite* is to a chill; that is, it will almost infallibly obviate the ill-effects, if given before organic mischief has been set up. It becomes thus the great remedy to be administered in all cases of concussion, sprain or other suffering from violence. It removes, as Hahnemann says: 'the pernicious consequences which often attend falls, contusions, blows, thrusts, straining, twisting or tearing the solid parts of our organism. But, unlike Aconite, it will follow up the cause to many of the changes it effects, even when of long standing and profound character. Such are those instanced by Dr. Bayes in his interesting

article on the drug, viz.: the chronic muscular stiffness—called rheumatism—of old laborers, and the cardiac hypertrophy of boating men. Mr. Nankivell has illustrated the same thing by some of the thoracic affections of the Cornish miners."

Again, on another page: "In external injuries, Arnica may be used locally, as well as inwardly; and will give speedy relief to pain, while promoting the restoration of the bruised part to its normal condition. Any one who has tried it when his finger has been jammed in a door will bear witness to the statement."

Also: "A sensitiveness of the body to pressure, so that everything on which the patient lies seems too hard, is another recognized symptomatic indication for *Arnica*. This feature is often met with in low fevers, and the medicine was not without repute in such disorders among the older homœopathists."

The foregoing will give a fair idea of the manner in which the work treats of the various leading remedies.

One can readily see that the chapter on Arnica alone would richly repay any physician unacquainted with the supreme necessity for this remedy, internally administered, in the countless accidents that are daily occuring in this busy world. (It might not be amiss here to add that the common *Arnica* of the drug shops, and a first class homœopathic *Arnica tincture* are two very different things). The book in question contains 932 pages, and bound in half Morocco, cost $7.00 less 10 per cent. to the medical profession, postage 26 cents. Bound in cloth, $1.00 less.

For Catarrh and Hay Fever.—In a very interesting paper in the *U. S. Medical Investigator*, Dr. W. D. Gentry, the well-known author of the *Concordance Repertory*, gives a brief account of Skookum Chuck Lake and of the effect of the salts of its water when proved.

"The water is of a deep amber and almost red in the sunlight. The following is an analysis of the salts, obtained by evaporation of the water; the proportion being in grains per U. S. gallon of 231 cubic inches:

Sodic chloride,	16.370
Potassic chloride,	9.241
Sodic carbonate,	63.543
Magnesic carbonate,	.233
Ferrous carbonate,	.526
Calcic carbonate,	.186
Aluminic oxide,	.175
Sodic silicate,	10.638
Organic matter,	.551
	101.463
Lithic carbonate, Potassic sulphate, Sodic bi-borate,	Each a trace.

"The lake has no outlet, but is fed by two enormous springs. It contains no living things with the exception of axoloti, a kind of salamander, such as are found in the lakes of the Mexican Cordilleras.

"The medical and curative properties of this remarkable lake was known to the Indians of the northwest as far back as they have any legends or tribal history, and it was held in such reverence by them that the country around this lake was called 'Sahala Lyee Illihe,' or 'Sacred Grounds,' and no matter how hostile the tribes were to each other, no Indians journeying to or from the "Skookum Limechen Chuck,' or 'strong medicine water,' were ever molested.

"When the Indians were considering the transfer of their lands to the government, many years ago, it is recorded as a matter of history, that old Quetahlguin, father of the present Chief Moses, and 'Old Joseph,' father of Chief Joseph, lately a prisoner of war, with the broken remnants of his band, after weeks of deliberation and consideration, with the 'Sahala Lyee,' or Great Spirit, through their medicine-men, or prophets, firmly said: 'We have talked with the Great Spirit and we have slept with his words in our ears. The Great Spirit is our father and the earth is our mother. We have a good home and it was made for us by the Great Spirit; it is a part of us; it is our mother. In Wallowa Lake are an abundance of fish created especially for our tribe. None other of his red children have such fish. In the 'Skookum Chuck' we have a remedy for all our ailments. We only have to bathe in and drink its water and we are made well. If we sign the treaty we will forever offend the Great Spirit; we will sign away our mother and she will cry. Her tears will dry up these lakes and we will be hungry and sick. We will go to the Skookum Chuck only to find that its waters have disappeared.'

"The story is told of a Frenchman passing the lake many years ago, before the properties of the water became known to the whites, with a drove of sheep afflicted with a skin disease called 'the scab.' As soon as the sheep saw the water they ran to it, but would not drink. They stood in the water for some time, and in a few days they were well of the 'scab.' The Frenchman was suffering with rheumatism. He concluded to try the water of the lake for his disease. He was speedily cured. The whites were soon attracted to this lake by the stories of marvellous cures reported by the Indians, and by seeing Indians return in health and vigor from the lake, who had been taken there on litters, appearing at the point of death. It is estimated that over 20,000 people have visited this lake since 'Joseph's Band' were driven from that section of the country, and it is fast becoming as popular as any other of our great health resorts.

"My attention was called to Skookum Chuck some time since,

and I procured some of the salts and triturated a quantity, making the first, second, third and sixth potencies. I partially proved the first potency by taking two grains every two hours. The first effect produced was a profuse coryza with constant sneezing, as in hay-fever. This continued until the medicine was antidoted by tobacco. My appetite was greatly increased. Some rheumatic pains in limbs, and heaviness about the sacrum. The catarrhal effects were so severe I could not continue the remedy. I have used the third and sixth potency in my practice and have cured a number of cases of catarrh, and am confident that the remedy will be curative in hay-fever."

The remedy which, for want of a better name, we may designate *Aqua Skookum Chuck* may be had in 3x triturations.

Perfumery.—A contributor to *Popular Science* claims that living in a perfumed air will, in his opinion, "prevent lung diseases, and arrest the development of consumption." The perfume may be from flowers or the artificial scents. It is but fair to add that the writer is connected with the manufacture of perfumery.

A Sulfonal Symptom.—Dr. William Boericke has the following pertinent hint anent *Sulfonal:* "Although the manufacturers of this new and interesting drug, parade as a fact and advantage that it has no "after-effects or injurious results from even large doses," several observers have noticed quite decided symptoms arise from its use. A very uniform condition produced is, *a sense of great exhaustion*, which may follow a quiet night and rather exhilarating awakening. I have had occasion to give it to a patient suffering from nervous prostration and inability to sleep, when the persistence of the latter condition made me have recourse to this palliative measure. Sulfonal in a 15-grain dose was administered at 9 P.M. Five minutes after taking it the patient experienced a sensation similar to having a spider-web drawn over the body, beginning at the feet and slowly going to the head, accompanied by drowsiness. Sleep would follow in the course of an hour and continue about five hours, followed by an hour's waking and again several hours' sleep. The peculiarity of the awakening in the morning was the exhilarated state—patient was hopeful, felt perfectly well and happy, enjoyed breakfast. The eyes were blood-shot and restless. The condition was invariably one of ecstasy, compared to her usual state, and this was soon followed by a sensation of *profound weakness*—a gone, faint feeling and despondency. This alternation of states, the rosy-hued awaking and consciousness of health and well-being, and subsequent depression and weakness, such as she had never experienced before, was very marked and only attributable to Sulfonal, as this series of symptoms passed away on stopping the drug and returned on taking it again."

A Warning Note.—The *Chemist and Druggist*, of August 14th, contains the following: "An awkward series of accidents has occurred with the humanized virus employed at the Academy of Medicine for vaccinating purposes. From the report of Dr. Hervieux, of the learned body, it appears that five children inoculated on May 11th have developed syphilis. An inquiry made by him, in connection with Dr. Weill, has shown that the babies from which the lymph was taken are apparently perfectly healthy, but one shows slight indices of probable hereditary syphilis. The instruments used for inoculations are above all suspicion. These unfortunate accidents show that animal virus, notwithstanding all its inconveniences, should be preferred, and the Academy must have thought as much when it built its two-stall cow-stable for vaccinating purposes." Unpleasant experience may be avoided by getting the proper kind of vaccine points from responsible houses.

Insomnia.—Testimony of the value of *Passiflora incarnata* in cases of insomnia accompanied by great nervousness comes from many quarters. It produces a quiet soothing sleep and yet is not a narcotic, as the patient may easily be awakened from it and his mind is perfectly clear, yet he falls at once again into a sweet sleep. Ten, twenty or thirty drops of ϴ constitute a dose. One writer says that in extreme cases he gives forty drops, every two hours, until rest and sleep come. With some people five drops are sufficient.

Hiccough.—A writer in the *Chicago Medical Times* says he cured "a case of intractable hiccough in an old man when every possible remedy had failed and death seemed inevitable" with a few drops of *Eupatorium perfoliatum*. "A few doses produced relief, and there was no return of the disease after the first day."

Drinking Water.—A physician in writing about drinking water says: "If in any house there should occur a single case of typhoid fever or diphtheria, test the drinking water or have it done at once. A few cents will buy an ounce of saturated solution of permanganate of potash at a chemist's. If, when a drop of the solution is added to a tumbler of water, its color changes to brown, it is unfit to drink. If it is clear or slightly rose colored after an hour it is, broadly speaking, safe."

Mullein Oil.—A few drops of *Mullein Oil*, put into an aching ear, says Dr. Waterhouse in the *American Medical Journal*, often acts like magic, relieving the pain at once; many cases of deafness have been entirely cured by its used as a local agent. Given at the rate of ten to twenty drops to four ounces of water, it becomes a valuable remedy in the treatment of nocturnal enuresis of children; the above

proportioned four-ounce mixture, given in doses of a teaspoonful four times a day, will often cure the most obstinate cases within a few weeks.

Apoplexy.—"I desire to again call the attention of the homœopathic profession to the use of *Kali bromatum* 2x, 3x and 6x, in cases of apoplexy, and of similar symptoms of uræmic origin. *Opium*, *Belladonna*, etc., so often fail, that I am sure the above remedy will be welcomed, and my own success with it makes me feel it a duty to repeat my former notice of it. The somnolence and stertor of *Opium*, and even convulsions, and sometimes aphasia; also albuminuria; these symptoms indicate the drug."—J. C. Morgan, M.D., in *Cal. Homœopath.*

Gleaned Suggestions.—Dr. Gale, of Quebec, cured "washerwoman's headache" with *Phosphorus*, and so did Dr. John H. Clarke (*Hom. World*). Symptoms: "Whenever she washes clothes or walks fast she has rush of blood to the head, red face and eyes, heat in the head, sensitiveness of the scalp to the touch, sudden shooting pains in the head, especially in the vertex." Where the headache follows washing day, *Phos.* is equally efficacious.

Dr. Clarke finds that *Staphisagria* will cure toothache when the pain is worse "when the tooth is touched, especially by hot things; also worse when out of doors or drawing cold air into the mouth, and worse at night."

"But Dr. Gallavardin does not confine his attentions to the morally diseased and their treatment by medicines; he turns homœopathy to the service of beauty, and takes away unsightly developments of fat. Double chins disappear, as also do rolls of fat on the shoulders and chest, before the potent globules. *Sulphur* and *Calcarea* are his mainstays here; red puffy cheeks call for *Sulphur*. *Sulphur* is also related to the front part of the thorax and the fatty deposits there; *Calcarea* to the posterior part of the thorax in the same way."—*Hom. World.*

Dr. Robert T. Cooper (*Hom. Review*) say that *Sulphur* (*Tinct. fort.* pilules) will cure ague and obstinate forms of intermittent fever; that an officer in Punjab "cured case after case of the worst forms of ague with it." Another gentleman in Turkey "treated nine cases of ague with these pills, and in every one of these cases succeeded in arresting the fever within twenty-four hours." In one case *Sulphur* prevailed where Quinine had been administered in vain. The prescribers in these instances were led to give the remedy through the influence of Dr. Cooper.

Diphtheria.—The rather startling assertion is made, that wherever a case of diphtheria is found, investigation will develop the

fact that kerosene oil lamps are used habitually about the house. The truth of this may be easily ascertained by physicians.

Hints.—We take the following hints from a paper read before the Illinois Association by Dr. A. G. Downer:

Cicuta virosa, in the 2x dilution, in doses of from one to five drops to the dose, from fifteen minutes to one-half hour apart, will always cure convulsions of children from whatever cause.

Agaricus muscarius is a specific remedy for that annoying condition of twitching of the eyelids.

Allium cepa, in mother-tincture and low dilution, is nearly always specific in that troublesome condition—the bane of surgeons—neuralgia of the stumps.

For a fetid "oozing of the feet," *Silica;* ditto, in the arm-pits, *Petroleum.*

For nasal catarrh in children, *Aurum met.*

An Old Writer.—"My heart forebodes me, that I, too, by venturing to suggest the use of Swedenborg's medical works, shall come to be regarded as tainted with a touch of madness. In bringing down such a judgment upon my head, I shall at any rate have the consolation of finding myself in good company—Swedenborg, Newton, Hahnemann, besides many others."—Dr. C. Bojanus, of Samaria, Russia, in *Hom. World.*

One of these works, *The Soul*, was given an extended review by Dr. O'Conner, in the RECORDER (May, 1888). Another one that has received considerable attention of late, is *The Brain*, in two volumes, and more to follow; another, the *Economy of the Animal Kingdom.*

Dr. J. A. Terry Writes: "I am indebted to the RECORDER for valuable medical hints that have proved true at the bedside, and which have been the means of accomplishing successful bits of healing for me."

Dr. Terry has returned from a ten-years' absence in foreign countries, and settled at 133 W. 45th Street, New York. He devotes attention to diseases of the throat, larynx and chest.

Hensel's Tonicum.—A colored woman of slender build, aged about forty, who had to work hard for her living over the wash-tub, was sick for over a year; her strength slowly declined and she became more emaciated every day. She doctored herself with ready-made drug-store medicines, and was doctored by allopathic and finally by a homœopathic physician, but none of them were able to help her. A lady for whom she washed, and who had a high idea of the merits of *Hensel's tonicum*, and an innate love for doctoring, gave her half a bottle of it and told her how to use it. She

did so with most happy results, gaining in flesh and strength from the start. Her doctor, whom she consulted before using it, said, afterwards, it seemed to be just what her system needed, as her trouble was of a malarial nature; that her blood, which before seemed to be watery, had recovered its proper consistency. In short, the woman who had been ailing for nearly two years and steadily growing worse, had, by the aid of this iron tonic, recovered health, strength and spirits. May it not be that there are states of the system following disease when medicine does no good? When food does not nourish, and what is needed is an element, the absence of which prevents recovery? This is especially true of sufferers from malaria. Of them it is said, the poison still lingers! If it does, then medicine is needed. But medicine in such cases seems powerless, and is it not at least open to discussion that the patient suffers, not from the malaria, but from the lack of something without which recovery is impossible, or, at best, extremely slow? This tonic (Hensel's) is a combination of ferric and ferrous oxide in the same proportions found in the human blood of a healthy body, and is not, properly speaking, a medicine. We might almost call it a metallic food. The systems of those who need it are not suffering from disease, but from the loss through disease of precisely that element which this happy combination of the two oxides of iron supplies, and which when supplied completes the work of the physician, who has expelled the disease, by supplying the needed element the lack of which has prevented the return of health. This, like many other things in this ever changing world, is but a theory, but one that bears a strong resemblance to being founded on truth; and, furthermore, one that is not in conflict with the great law of homœopathy. Sailors shut up in the ice bound north for a winter almost always contract scurvy; that which fresh vegetables and fruits supplies to their systems is lacking; medicine does no good; but a few fresh vegetables soon cures them by supplying their systems with a lacking element. So, we believe, *Hensel's tonicum* acts.

Announcement.—Messrs. Boericke & Tafel announce the following changes in price.

Sugar of milk, best article, 50 cents per pound.

Triturations from 2x to 6x, 35 cents for a 2-ounce bottle; 4-ounce bottles 50 cents; 8-ounce bottle 75 cents; 16-ounce bottle $1.25.

A New Catalogue.—Messrs. Boericke & Tafel hope to have their new *Physician's Price Current and Catalogue* ready for mailing about December 1st, or shortly after. Any physician desiring a copy should send in his name, and immediately after publication it will be mailed to him. It has certain new features that will make it a great convenience to *all* physicians.

THE

Homœopathic Recorder.

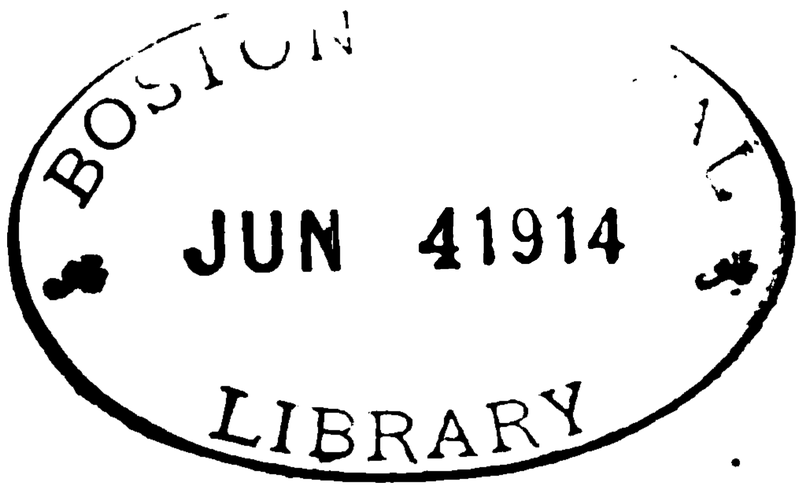
BI-MONTHLY.

VOLUME V.

1890.

PUBLISHED BY

BOERICKE & TAFEL.


BOSTON
JUN 41914
LIBRARY

INDEX TO VOL V

A Great Work, 45.
A Growing Fad, 38.
A Lost Remedy, 37.
Acidum Lacticum, 129.
Agave Americaua, 130.
Alabama Law, 183.
Amygdalus Persica, 182, 214.
An Off-Hand Study of the Salts of Barium, 241.
Antifebrine on Memory, 46.
Apocynum Cannab., 94.
Apples, 40.
Aspidosperma, 21.
Asthma, 6.
Aurum Met., and Syphilis, 146.

Baldness, 43.
Barium, The Salts of, 241.
Bellis Perennis, 189.
"Black Death," The, 277.
Blatta Orientalis, 254.
Book Chat, 65.
Burns, Tannin Treatment, 131.

Cactus Grandiflorus, 278.
Calc. Phos., and Bacon, 192.
Calendula in Deafness, 88.
Carcinoma, 191.
Cases from Practice, 4, 207.
Ceanothus in Leucorrhœa and Suppression of the Menses, 259.
Census of Hallucinations, 189.
Chloramide, 240.
Chrysophanic Acid, 20.
Chorea, 107, 222.
Comfrey, 226.
Complexion Cure, 233.
Constipation, 42.
Consumption Cured, 120.
Cornus Florida, 227.
Croupous Bronchitis, Acute, 71.
Cuphea Vis., 7, 231.

Deafness, 88.
Decision, 48.
Diarrhœa, Infantile, 27.
Diphtheritic Throat, Thuja, 45.
Dr. Schwabe's Gift, 64.
Dropsy, 94.
Dust Heap, The, 269.
Dynamization, 124.

Eczema, 11, 68, 183.
"Envoy," 288.
Erysipelas, 107.
Eupatorium and La Grippe, 122.
Euphorbia Lathyris, 191.
Extraordinary Urinoscopy, 13.

Faith Cure, 116.
Fallacies in Medicine, 267.
Ferrum Phosphoricum, 263.
Fevers, Southern, 118.
Fidgets, 121.
Fluid Extracts, 44.

Gila Monster, 163, 258.
Glonoinum, 43.
Glyc. in Gunpowder Hurts of Eye, 214.
Grafts, 209.

Hæmorrhoids, 4, 93.
Heart Disease, 27.
Heloderma Hor., 163, 258.
Highways and Byways, 41.
Homœopathy in England, 61.
How do Medicines Act? 58.
How Hahnemann Cured, 215.
Hydrocele, 125.
Hydrophobia, 130, 180.

Institute Session, 1890.
Ipecacuanha, 47.
Ipecacuanha, A Study of, 1.

Jacaranda, Gua., 149.
Jamaica, 39.
Jour. of Hom., 190.

La Grippe in Jamaica, 125.
Lycopus Virginicus, 93.

Mastitis, 24.
Melilotus, 40.
Milk Sugar, 27, 287.
Mullein Oil, 25, 85, 125, 132.
Mullein, On the Empirical Use of, 49.

NEW PUBLICATIONS.
A Clinical Materia Medica, 282.
A Clinical Study of Diseases of the Kidneys, 283.
A Cyclopædia of Drug Pathogenesy XIII., 187.
A Dictionary of Medicine, 186.
A Hand-Book of Diseases of the Skin, 140.
A Repertory of Convulsions, 285.
Consumption; Its Cause and Nature, 35.
Diseases of the Eye and Ear, 80.
Eating for Strength, 34.
Essentials of Anatomy, 236.
Essentials, Diseases of Children 284.
Essentials, Eye, Nose, and Throat, 235.
Essentials for Forensic Medicine, 138.
Essential, Practice of Medicine, 284.
Essentials of Diseases of the Skin, 138.
Essentials of Gynæcology, 138.
Fevers and their Hom. Treatment, 236.
Foods for the Fat, 137.

Homœopathic Therapeutics, 140.
How to Preserve the Health, 187.
How to Save the Baby, 35.
Klinische Arzneimittellehre, 81.
Notes, 36, 81, 238, 286.
On Fistula and Its Radical Cure by Medicine, 237.
Philosophy in Homœopathy, 187.
Practical Electricity, 139.
The Examination of Urine, 138.
The Family Homœopathist, 238.
The Health of the Skin, 235.
The Homœopathic Treatment of Alcoholism, 186.
The International Medical Annual, 139.
The Stepping Stones to Homœopathy, 237.
The Twelve Tissue Remedies, 81,
Tuberculosis or Pulmonary Consumption, 284.

Natrum Sali., 240.
Neuralgia, 12.
Nocturnal Enuresis, 142.
Notes on the Transactions, 15.
Nothing New Under the Sun, 95.
Nuphar Lutea, 39, 86.

One of our Remedies in the Rough, 98.
Once More Unto the Breach, 143.
Otitis Media, 11.
Oxalic Acid in Lumbago, 13.

Palmaritis, 11.
Paraffine, A Proving of, 193.
Passiflora Incarnata, 12, 42, 106, 161, 266.
Passiflora in Liquor and Morphine Habit, 266.
Peach Leaves, 214.
Peroxide of Hydrogen, 273.
Phys. and Therap. Action of Strychnine, 153.
Pickings from Penna., 169.
Poisoning, Aconite, 5.
Poisoning, Belladonna, 6.
Poisoning, Nutmeg, 95.
Poke Berries, 44.
"Potency," 68.
Pulsatilla, 97.

Quebracho, 21.

Rectum in Relation to Chronic Diseases, 103.
"Red Line," Another View, 212.
"Red Line," Reply," 271.
Rheumatism, 240.
Rheumatism, Arthritic, 129.
Rumex Crispus, 231.

Sabal Ser., 180.
Salol, 47.
Sanguinaria, A Study of, 151.
Sanicula, 86, 190.
Saw Palmetto, 180.
Scintillations from Ohio, 108.
Scolopendra Morsitans, 43.
Scrofulous Cases, 24.
Skookum Chuck, 10, 67, 86, 183, 188.
Solidago Virga-aurea, 225.
Solanum Carolinense, 181.
Spare Hour, The, 13, 77, 111, 173, 202.
Statistics, 142, 232.
Sterilized Milk, 28.
Sulphonal Death, 43.
Surgery and Homœopathy, 125.
Symphitum, 226.
Syphilis, 145, 149.
Syzygium, 91.

The Old Story, 40.
The Scientific Method, 143.
There's Millions In It, 142.
Theridion Curassavicum, 87.
Thlaspi, 91, 141.

Urticaria, 11.

VETERINARY DEPARTMENT.
A Silicea Case, 134.
Allopathy, 132.
Asthma, Canary Bird, 28.
Asthma, Equine, 136.
Basedows Disease in Animals, 23.
Blindness in Dog, 235.
Calving, 29.
Catarrh in a Parrot, 135.
Chicken Cholera, 134.
Colic in Horses, 234.
Corn Stalk Disease, 83.
Cough, Equine, 135.
Diarrhœa, 34, 134.
Epileptic Fits, Horses, 281.
Epizootic, Cows, 31.
Erysipelas, 184.
Heaves, 233.
Heaves in Horses, Silphium, 279.
Hide Bound, 30.
Hoarseness in a Canary, 184.
Ichthyol in Veterinary Practice, 82.
Indigestion, Traumatic, 133.
Lame Colt, 122.
Lame Dog, 185.
Lame Horse Cured, 29.
Leucorrhœa, 184.
Lice, 135.
Nephritis, Canine, 136.
Pink Eye, 84.
Quarter Crack, 30.
Rheumatic Lameness, 84.
Ringbone, 184.
Roup, 282.
Scab, 33.
Sore Eyes, 33.
Sundry Cases, 234.
Tetanus, 137.
Two Cases, 280.
Ulcer of Cornea, 137.
Veterinary Practice, 31.
Warts, 133.

Vomiting, 182.

Whiskey and Tobacco, 230.

BOSTON MEDICAL
JUN 41914
LIBRARY

THE

HOMŒOPATHIC RECORDER.

VOL. V. PHILADELPHIA, JANUARY, 1890. No. 1.

A STUDY OF IPECACUANHA.

WM. E. LEONARD, A.B., M.D., PROFESSOR OF MATERIA MEDICA AND THERAPEUTICS, UNIVERSITY OF MINNESOTA, MINNEAPOLIS.

THE every-day drugs are those the student and practitioner should know the most about. The symptomatology of at least twenty-five drugs should be as familiar to the homœopathist as his A B C's. This accomplished, the host of others, both new and old, can be more easily compared, understood, and made of practical value. Let each one choose his twenty-five, according to the needs of his climate and practice, and become therewith a thorough master. No one respects a mechanic who cannot handle at least a few essential tools skilfully. So it should be with the therapeutist.

Ipecac. is one of these every-day tools. The Ipecac. of commercial medicine is the dried root of Cephælis ipecacuanha, a small shrub growing in Brazil. The common German name, beech-wurzel (vomit-root) tells best its primary effect, which is due to its alkaloid *emetin*. But its peculiar odor also excites, in some, sneezing and asthma, this again being probably due to a fetid volatile oil contained in the plant. These primary effects outline its most marked spheres of action, viz., the gastro-intestinal tract and the respiratory organs. But its detailed symptomatology will disclose a much broader field of application, especially in the manifold reflex condition of nervous and rheumatic patients.

Almost everywhere when Ipecac. is indicated there is *distressing, intense nausea and inclination to vomit*, or *after vomiting there is immediate inclination to do so again. Constant nausea*, generally *with a clean tongue*, is a key-note to the use of Ipecac.

Head.—With this nausea, rheumatic patients will often present the characteristic sensation of bruising or crushing in the head or bones of the head, which pierces through all the cranial bones down into the teeth and roots of the tongue. (*Cocculus* has a similar headache, but, with the same intense nausea, more vertigo, confusion and stupefaction, the sensation in the brain being as though it were rolled up or compressed into a smaller bulk.)

In nervous sick headaches, unilateral, commonly over one eye, accompanied by *deathly nausea*, *Ipecac.* has a wonderful curative record; blue rings encircle the eyes upon a very pale face, and the muscles about the mouth betray the intense nausea. If *Ipecac.*, in potencies of the 30th and upward, is at hand for immediate use at short intervals when the attack begins, and is taken occasionally for premonitions of returns, it will entirely cure such cases.

Stomach.—The nausea of *Ipecac.* is manifested, especially in children, by a drawn line from the alæ nasi to the corners of the mouth, as in *Antim. tart.* and Aethusa, and, in such patients, and likewise under these remedies, vomiting is followed by sleepiness and exhaustion, such exhaustion being the most sudden and intense under *Aethusa.* The nausea of *Ipecac.* is worse stooping, accompanied by sweat, foul breath, sometimes thirst, and always seems to come from the stomach; there is often a sensation as if the abdomen were hanging down relaxed (as under *Tabac.* and *Sepia*), and aversion to all food. Nausea accompanies all the hæmorrhages of Ipecac., viz., the epistaxis, hæmatemesis, hæmoptysis, metrorrhagia, etc.

In children this nausea is often followed by convulsions, especially when such indigestible substances as lemon-peel, etc., are the cause, or the same from the reappearance of a suppressed eruption; with rigid muscles, or jerking of the arms towards each other, cold sweat, paleness, etc. (Dr. R. Hearn, of Toronto, Ont., describes a typical cure with Ipecac. upon page 423 of the December *Medical Advance.*)

Abdomen.—With the stools of Ipecac. there is generally a cutting about the umbilicus, < every motion, *nausea* and *vomiting*, the stools being frequent, *greenish* or bloody mucus, or *fermented, looking like frothy molasses;* or in dysentery, dark, pitch-like. Ipecac. best suits fat, chubby, pale children, and cures their summer diarrhœas and beginnings of cholera infantum.

Respiratory Tract.—In the children just described, Ipecac. will cure the beginnings of a coryza, when the nose is stuffed, with loss of smell, and especially when accompanied with hard breathing, cough, threatened suffocation and nausea. (*Arsenic* often completes the cure of such cases.)

Later, in the bronchial catarrh of infants, the cough of Ipecac. is dry, tickling, spasmodic, and ends in *choking* and *gagging.* If old

enough to describe this tickling, they will say that it extends from the larynx to the very lowest extremity of the bronchi.

Still later, Ipecac. is indicated when auscultation shows loud, *coarse* mucus râles over the chest, with violent paroxysms of coughing, vomiting and retching, which dislodges some of the mucus and affords temporary relief. Before such paroxysms the child has a pale face and blue surface, and suffers extreme dyspnœa. (It is necessary to distinguish *Antim. tart.* carefully in such conditions. In the latter the child is more prostrated and cold, there are more extensive and *finer* râles over the chest, and the cough has lessened, or almost ceased, with increased dyspnœa and drowsiness. Altogether it is a more alarming and serious condition than that of Ipecac.) *Chelid.*, *Sulph.*, *Lycop.* and *Phos.* have to be compared in like conditions, they being suited to parallel cases, except *Sulphur*, which relieves after *Antim. tart.*, when atalectasis threatens, especially the left lung.

In whooping-cough Ipecac. meets the extreme spasmodic convulsive cough, which results in the child stiffening and becoming *rigid, pale or blue* and *loses its breath;* the expression of nausea is present, and relief comes with the relaxation of the spasm and vomiting of phlegm. *Cina* and *Cuprum* have very similar spasms, the latter being relieved by a drink of cold water.

In *Asthma*, Ipecac. applies, as does its complement *Arsenic*, to the spasmodic (truly nervous) variety, when the *sudden wheezing, dyspnœa, with weight and anxiety about the præcordia threaten immediate suffocation, the least motion aggravates*, and the cough is incessant, without expectoration, causing lividity, until gagging and vomiting bring relief.

The hæmoptysis of Ipecac. consists of gushes of bright-red blood, or repeated hacking of frothy, bloody sputa, always with nausea and gagging, and sometimes with sudden suffocation, or sensation of bubbling in the chest.

Female Genitals.—Ipecac. suits the pinching, sharp pain about the umbilicus, running downwards to the uterus, which may precede an abortion; later, constant nausea, and discharge in gushes of bright-red blood. The same pain about the umbilicus, shooting from left to right and down into the hypogastrium, may accompany deficient labor-pains and indicate Ipecac.

In uterine hæmorrhages, as Prof. Guernsey writes: "Where there is a *steady flow of bright-red blood* give Ipecac., and don't resort to applications, manipulations, etc." The warnings are a low pulse, nausea, heavy breathing, and this soaking hæmorrhage, which may be first recognized upon the floor at the foot of the bed.

Fever.—In intermittents that are quite mixed by drugging, especially by Quinine, do not forget Ipecac. There will be a *short chill* and

long fever, characterized by nausea and vomiting, backache, intense headache, the sweat coming last. It most resembles *Eupatorium*.

Cuprum and *Arsenic* complement Ipecac. mainly in chest troubles. Most of the cures recorded for Ipecac. were made upon women and children.

CASES FROM PRACTICE.

Hæmorrhoids.

DURING the past four years I have treated many cases, and during the last year more than usual. Some by salves, some by the ligature, others by that method which some enterprising medical genius must have conceived of while lost in the depths of Dante's *Inferno*, —I refer to the widely known *painless* injection treatment,—and others still by the use of Boericke & Tafel's suppositories. The latter method is easy for the doctor and pleasant to the patient, and where they are applicable, the case not requiring surgical means, their employment is often followed by gratifying results.

In my opinion and experience they are indicated in conditions of the rectum in which the internal hæmorrhoids do not have a tendency to suppurate, but rather to a flow of clear blood either dark or bright, and the characteristic itching, crawling, amounting sometimes to almost pain. I find these suppositories in many cases very soothing to that class of patients who desire relief, yet decline an examination.

A few cases taken from my books, treated during the summer of 1888, are given below.

CASE I.—May 15th, Mr. W., aged thirty, bookkeeper, a bad case of acute bleeding hæmorrhoids; gave Ham.^{0} internally and suppositories of Aesculus Hip. with Ham., to be inserted in the rectum morning and night, and one after each stool.

May 17th, better, continued same treatment. On the 1st of June came to my office, said he had been all right for a few days, but now an intolerable itching, with no bleeding, gave trouble. Prescribed Aesculus Hip. 30, internally and suppositories of Aesculus.

June 3d, better, continued same, which was followed by a cure and as yet no return.

CASE II.—June 14th, Mrs. E., dark complexioned, married, aged fifty, itching piles, chronic; gave Aesculus Hip. 30 internally, and suppositories of same. June 30th, better, continued same treatment. Patient cured.

CASE III.—June 16th, Mr. A., aged fifty-four, by trade tinner, case of acute itching hæmorrhoids, cured by a few suppositories of Aesculus Hip.

CASE IV.—June 17th, Mrs. W., brunette, married, aged thirty-two, acute itching piles; gave Aesculus Hip. 30 internally and suppositories of same. Cured in four days.

CASE V.—July 1st, Mrs. E., blonde, married, aged twenty-nine; acute bleeding hæmorrhoids, with terrible itching: could hardly remain long in one position. This case was cured by using three suppositories of Aesculus with Ham.

CASE VI.—July 14th, Mrs. J., dark complexioned, widow, aged thirty-seven, a very troublesome case of chronic itching piles; Aesculus Hip. 30 given internally three times a day, and suppositories of same, effected a cure in about three weeks.

CASE VII.—July 21st, Miss C., blonde, aged twenty-three, works in a rubber shop; a severe case of chronic bleeding hæmorrhoids, with at times considerable itching. Two dozen suppositories of Aesculus with Ham., cured this patient.

CASE VIII.—August 2d, Miss L., blonde, aged thirty-seven, chronic itching piles; a box of Aesculus Hip. suppositories did not cure this case, but greatly relieved, so much in fact, that she sent for another dozen.

Case IX.—September 4th, Mr. W., clerk, aged twenty-six, complained of itching, crawling and burning sensation in the button-hole orifice, chronic; Aesculus Hip. 30 internally and suppositories of same cured in about ten days.

CASE X.—September 16th, Mr. V., clerk, aged twenty-eight, a chronic case of itching piles; cured him in about a week with suppositories of Aesculus Hip., one inserted in the rectum morning and night. I might add, Mr. V. has been to me twice before during the past three years for a similar trouble, and the same treatment was used then with satisfactory results both to patient and myself.

A Case of Aconite Poisoning.

Mr. W——, aged seventy-nine, weighing 130 pounds, in fairly good health, came here a few days ago to visit some friends. On Sunday evening, not feeling very well, he asked to be given a dose of Jamaica ginger, and by a mistake in getting the wrong bottle swallowed a dessert-spoonful of the tincture of Aconite (Boericke & Tafel's) upon an empty stomach. He immediately complained of great smarting in the mouth and fauces, with difficulty of breathing. The bottle was examined, and thus the mistake at once discovered. His brother gave him a tumbler of milk to drink, which undoubtedly retarded the action of the drug a few minutes, and sent a man after a physician. I was soon at the side of the patient, and found him excited, with the heart's action greatly increased, and difficult respiration. I at once injected in the right arm $\frac{1}{12}$ grain of Apomorphine (twenty

minutes after swallowing the Aconite), and in three minutes after easy and copious emesis took place, which continued at intervals for about half an hour. He now fainted, but soon recovered consciousness. His pulse at this time dropped to 40 beats to the minute. I then gave him Nux vomica ϕ in 4 or 5 drop doses to stimulate the heart's action, and two hours after taking the Aconite the pulse was beating good and strong, about 60. The next morning the patient walked to my office, none the worse for the unhappy experience.

I have used Apomorphine before in similar cases, where urgent and prompt vomiting was necessary, and have never seen its use followed by any bad effects. The only unpleasant thing I have noticed was that after free vomiting had taken place the contractions of the stomach still kept up (in some cases), which almost resembled a violent hiccough, and this passed off in two or three hours. Neither have the patients complained of nausea, but of some dizziness.

A Case of Asthma, with Belladonna Poisoning.

One of my best patients, a married lady, aged fifty-two years, weighing about 160 pounds, rather light complexioned, although not a well-defined blonde, is a great sufferer from asthma, a chronic case of some fifteen years' standing. One of the worst cases of bronchitic asthma I ever saw. At such times when the attacks come on she will gasp for breath, the nostrils will be dilated, eyes protruding, and muscles of anterior neck bulging in and out in the desperate effort to expel the air. Many doctors have attended this case, many quack inhalations been used, but nothing gives much relief, the patient being generally compelled to grunt out the attack. I have vainly prescribed homœopathically, pored over the pages of my materia medica with the assistance of the midnight oil, and sought information from various writers, only to fall back on small hypodermic injections of morphia and atrophine, which always seemed to have power to control the distressing symptoms. I had found after many trials that the morphia and atropia acted much better together than the opium alone. Noticing the beneficial action of the atrophine, I decided to use Belladonna alone internally, as a palliative remedy, in physiological doses, as an antispasmodic, to produce relaxation of the spasm in the bronchii, and gave the lady a ℥ii vial of Boericke & Tafel's pure ϕ, with directions to take 10 drops when a severe paroxysm of asthma should come on, to be followed by a similar dose in an hour, if relief was not obtained. The opportunity came; the first dose was taken, which partially relieved the wheezing, but did not in any way inconvenience the patient, and the second dose was taken, according to directions,

followed in a few minutes by complete relief from the asthma. Soon after the second dose she complained of great heat and dryness of the mouth and throat, which was soon increased to a feeling of burning, as if she was on fire, with nausea, faintness, could not stand without help; vomiting was present, with much thirst. Then there came on great mental excitement, partial hallucinations, and patient was decidedly hysterical. The face became red and flushed, with some headache. These unfavorable symptoms partially passed off in three or four hours, but the dilatation of pupils and impairment of vision continued marked during the next twenty-four hours. The patient was very weak and excited the next day. Face somewhat redder than usual. There was an increased desire to urinate, accompanied by scalding and burning in the urethra; could only make a few drops at a time, yet after straining somewhat a free stream would be passed.

It might be well, in this place, to add, that I have reduced the dose of Belladonna to 4 and 5 drops, repeated in an hour, and find, in this case, it controls the asthma satisfactorily to the patient, this small dose producing the characteristic dryness of the mucous membranes.

H. E. C.

FALLS VILLAGE, CONN.

CUPHEA VISCOSISSIMA.

REPLY TO DR. HALE.

"Ha, ha, boy! say'st thou so? art thou there true penny" *royal!*

"An I had but one penny (*royal*) in the world thou shouldst have it to buy gingerbread."

IN a recent critique in Gross and Delbridge's *New Remedies*, edited by Dr. Hale, the doctor informs the public that "Dr. Roth reports in the RECORDER remarkable results from tincture Pennyroyal." He also vouchsafes the startling information that "Cuphea is not Hedeoma!" And in the *veni, vidi, vice versa*—yep and nope style, so much affected by sophomore and cowboy—he asserts "there are only two plants called pennyroyal, the Hedeoma and Isanthus." He also—in that jerk of the head and purse of the lips kind of style—hints that "there must be some error" running around loose, and he may have imagined that, with a few masterly strokes with the back of the pen, he had brained the error "in this" report. An error in a formula is in the nature of a damnation, hence it is important, if not imperative, that this charge of "some error" be carefully looked into. Well, who made an error? What is it?

Nous verrons. In Dr. Roth's exceedingly interesting and highly important communication to the RECORDER, vol. iii., No. 6, wherein he gives the results of his experience with Cuphea viscosissima as a remedial agent in cholera infantum, he says: "I was persuaded by a lady friend to use red pennyroyal tea;" she knew the plant only by its popular or common name. He then says: "I procured the fresh plant and made a tincture, as directed in the American Homœopathic Pharmacopœia, under article 'Hedeoma,'" or, in other words, the doctor finding no formula for preparing a tincture from red pennyroyal, he proceeded to make it in like form and manner as the tincture of Hedeoma is directed to be made, the only difference being that he used a like proportional quantity of Cuphea or red pennyroyal instead of Hedeoma or squawmint. It is at least presumable that Dr. Hale gave a similar reading to this portion of Dr. Roth's article; indeed, the most strained and distorted construction could hardly convince the average mind that Dr. Roth used any plant but Cuphea visc. in preparing his tincture.*

Dr. Roth also says: "This made a beautiful dark-green tincture, having an aromatic (a fragrant, agreeable) odor and a slight astringent taste." The Lythraceæ are rich in tannic acid. How does this description of C. tincture compare with H. tinctures? The last might be said to have a coarse, gross smell. However, some persons may fancy this wild-woods' odor and call it fragrant. Ferula and Limburger have many admirers. Should some doubting Thomas or smart Aleck still have a lingering hope that Dr. Roth didn't know what he was about when he made his famous tincture, and that, "partly by design and partly by mere accident," he experimented with Hedeoma, and not with Cuphea, his article, continuing, says: "I gave it a fair trial for two seasons . . . believing that Cuphea will prove a treasure." He refers to this new remedy not less than six times, calling it C. visc. or C. every time. If a scrupler lingers, he is in a bad way, and it may be that "he hath no delight in understanding." The popular, common or vulgar names by which plants are called cannot be enumerated; almost every well-known thing, animate or inanimate, has been called upon to furnish names for the different genera, species, and varieties. It is in many respects convenient for plants to have a familiar every-day name, although at times this may create some confusion, especially when two or more plants have the same common name, yet differ from each in every other particular, *i.e.*, which yellow Jasmine? Is it Gelsemium or Jasminum? Which Snakeroot? The white or black, dwarf or Sampson, the button-seneca,

---

* Did Dr. Hale read Dr. Roth's article carefully? Or did he, in the hurry of business, get things mixed and mussed up?

seneka, senega, or Virginia. Not to speak of the other four-score-and-ten of us poor old trees, bushes, weeds, roots, bark, leaves, etc., which have some kind of a snaky name.

Hedeoma pu, has at least three common names, viz., pennyroyal, wild pennyroyal, and squawmint (Darby), and it will be quite impossible for Dr. Hale not to see and appreciate the close and ardent mingling of Hedeoma, Squaw and Mint when the first is taken by the second in copious "hot infusions for producing perspiration;" regular red-hot squawmint juleps. See? To prevent any confusion which may and must arise from this commingling of names, the botanical nomenclature was adopted, by means of which the technical name of any plant is definitely fixed and established. Dr. Hale says that "Cuphea is not a pennyroyal, but a loose strife." That is to say Cuphea is not a Hedeoma, but a Lythraceæ. Right you are, but why perpetrate such a *prodigious* joke? This reminds one of some of the questions and replies occasionally found in the notes and queries column of the newspapers. For example: From the Slabtown *Ariel*: "We kindly assure a constant reader that cat-tail-grass is not a grass-tail-cat." "An old subscriber is informed that Salix eriocephala, or woolly-headed swamp willow is a true member of the vegetable kingdom, and has nothing to do with the genus Ovis or the Africans." It may be possible that Dr. Hale did not notice (it was plainly stated) in Dr. Roth's article that *Cuph.* belonged to *Lyth.*

Dr. Hale says: "There are only two plants called pennyroyal." It is not even easy to guess why this bit of information was volunteered; it would not have the least bearing upon Dr. Roth's article if there were two, or two hundred, or two thousand so-called pennyroyals. He, Dr. Roth, first definitely fixed and settled the name of the plant (see article, vol. iii., etc.) before he commenced to write about it, and Cuph. vis. is its name, and the whole subject of names was settled. Dr. Hale says that Isanthus is one of the "only two" plants called pennyroyal. Is that so? Isanthus cœruleus has at least two common names, one of them being blue gentian. This name might cause some persons to think that it might belong to Gentianaceæ, but that family and Isanthus are not relatives. They have not even a speaking acquaintance. It has another common name, viz., false pennyroyal (Eaton, etc.). That "ojous" prefix might cause the powerful and mighty old pennyroyal family to stick out its lips at a thing which was lipless, and false-faced besides. Hed might say to Isa: "You stuck up thing; you got into *Labiata* fraudulently, and *you* want folks to call you pennyroyal. What impudence!" But Dr. Hale says it is one of the "only two," and that ends the matter. This consolation remains, and it also just exactly fits the case of Dr. Roth's *red* pennyroyal: it was known

and called by that name before Dr. Hale existed, and will in all probability be called by that name after he has gone hence, to be no more seen of men. The man that knew everything "from the cedar that is in Lebanon, even unto the hyssop that springeth out of the wall," died nearly three thousand years ago, and his place has not yet been filled. Just here it might be well to mention that the English pennyroyal is Menthæ pulegium (Parr, *et al.*), and that some of its preparations—Oleum menthæ pul., Oil of pennyroyal and Aqua m. p. pennyroyal water—are officinal in L. E. D., and spiritus M. p. in L. This name, pennyroyal, is a good example of many plants that have the same common name. Thus, Hedeoma is indifferently called pennyroyal, wild pennyroyal, and squawmint; Isanthus is the false and Cuphea the red pennyroyal; Mentha pu. is the English and Cunile the old Roman pennyroyal. As there are many precincts yet to be heard from, its majority may be increased. Dr. Hale closes his remarks, saying that "Isanthus is much used in domestic practice . . . . in this country." In some portions of this country its curative power is an unknown quantity; persons don't dally with the *false* when they can obtain the red, and the prospects are good that the red will continue to be reproduced while time shall last. It is to be regretted that certain other persons do not investigate fully some one or more plants growing in their immediate neighborhood, and which are more or less used in domestic practice. Not every one might have the same rich reward which attended Dr. Roth in his researches, and in the successful scientific application of the facts which he arrived at, but surely such investigations should not be neglected. An art or science which is not progressing will very soon retrograde. As for Dr. Roth, his Cuphea is Cuphea, and Viscosissima is his profit.

J. C. ENGELBRECHT.

FREDERICK, MD.

As the botanical description in my first article was credited to Prof. Engelbrecht, it was deemed only proper that he should have the privilege of replying to Dr. Hale's uncalled for criticism. After a THIRD season's use of Cuphea, I can only add that I can use the remedy with increased confidence *where properly indicated.* It is not tincture pennyroyal, as erroneously stated by Dr. Hale, but tincture Cuphea visc., an entirely different plant.

DR. ROTH.

SKOOKUM CHUCK.

EDITOR OF THE HOMŒOPATHIC RECORDER:

Learning that you were about publishing my article on the wonderful Skookum Chuck Lake, of the new State of Washington, I wish to say that since that article was written for the *U. S. Medical*

Investigator additional cures have been made with the salts made from the water of the lake. With the first decimal attenuation, a two-grain powder mixed in half a glass of water, and a teaspoonful of this mixture given every two or three hours, I have cured two cases of eczema, one case of chronic, oft-appearing, urticaria, and one case of palmaritis of years' standing. This latter case was that of a gentleman who was so greatly and grievously affected that he could do no work on account of his hands being so raw and sore, and they looked so badly, and caused so much notice and remark, the patient was forced to wear gloves all the time. In addition to giving the remedy internally, I made some soap with the salts and had the patient wash his hands twice daily with the suds.

His hands were entirely well in three weeks. I find that beautiful soap can be made with these salts, and I am glad to learn that Messrs. Bœricke & Tafel are going to take an interest in bringing this valuable remedy to the knowledge of the profession. I hope they will also have toilet soap made from the salts so that we may all have something to recommend to take the place of the dangerous preparations, such as "Cuta Cura," which are being sold to and used by our patients. I think that a toilet soap made from the Skookum Chuck Lake water or its salts would prove more beneficial to all eruptions or diseases of the skin than any other soap or preparation now being sold by druggists or pharmacists.

Dr. Reed, editor of the *Investigator*, reports a case of chronic *Otitis Media*, of seven years standing, where there was a profuse, ichorous, cadaverously smelling discharge. Arsenicum was indicated, but failed to cure. The auricle and parts below the ear had been raw and sore for a long time on account of the discharge. *Aqua Skookum Chuck* was given internally and used locally. In two weeks the ear was well. Dr. Reed is now using the remedy in another case of eczema with beneficial results, and with flattering prospects of a speedy cure.

Respectfully,
W. D. GENTRY, M.D.

[The article referred to by Dr. Gentry was published in our last number, November, 1889, RECORDER.]

A REQUEST FROM DR. HALE.

Cactaceæ.

As a member of the Bureau of Materia Medica and Therapeutics in the American Institute of Homœopathy I have selected as the subject of my paper "The Pathogenetic and Therapeutic Properties of the *Cactaceæ*."

The number of known *genera* in this *family* is 18, and of *species* about 800. I desire to include in my paper all medical information concerning any species. I urgently solicit physicians of any country to send me all observations relating to the toxic and curative powers of any member of this important family, before June 1, 1890.

E. M. HALE, M.D.,
65 Twenty-second Street, Chicago, Ill.

PASSIFLORA INCARNATA.

A New Remedy.

HAVING used this new remedy a good deal recently, I desire to call the attention of physicians to it. The first notice that I ever saw of the medical uses of Passiflora incarnata was in the New Orleans *Medical Journal*, about 1839 or 1840, by Dr. L. Phares, of Mississippi. He gives some trials of this remedy, made by Dr. W. B. Lindsay, then of Bayou Gros Tete, La. He first used it in tetanus of infants, with success. He finally reports his successful use of it for thirty years in tetanus neonatorum. After he settled in New Orleans he extended his experiments with this remedy. That which grows on thin up-land is much the best. After using it for many years he says: "*I am satisfied that it is no narcotic, as it never stupefies or overpowers the senses.*" I have used it frequently in cases of sleeplessness of infants, as well as in adults, and find that it produces sound and refreshing sleep, from which the patient may be awakened at any time, and if allowed, will soon fall to sleep again. I have tried it in many grave cases of neuralgia, in which it has proven a very positive remedy, in doses of 25 to 30 drops every four to six hours.

It is almost a *specific* for neuralgia and tetanus in full doses, repeated every two hours until the subject falls asleep. The aqueous extract is a good application to *chancres* and painful ulcers and open cancers; also erysipelas. It is very soothing to painful piles, and aids in their cure. For new burns and scalds it perhaps has no equal. Dr. Lindsay used it in syphilis, and commends it highly in that disease. Prof. E. M. Hale, than whom there is no closer observer, says: "I have found Passiflora prompt to relieve erysipelas." He says, also: "I have used it in ulcers with advantage; also in neuralgias and tetanus." He says it has never failed to cure tetanus in horses for him. For horses, the dose of the fluid extract is from 8 ounces to 1 pint, repeated if necessary. Dr. J. H. Phares, son of Dr. L. Phares, says that the inspissated juice, reduced to a powder, is the best preparation. As a soporific, the concentrated extract, if properly made, would soon supersede Morphia. I have

used it in doses of 25 to 30 drops of the aqueous extract even in children, but I have never seen any alarming or unpleasant effects from this medicine. It should be gathered in May and made up.

I. J. M. Goss, A.M., M.D.

MARIETTA, GA.

(In homœopathic practice the ● of *Passiflora incarnata* is preferred. Dr. Goss, we should state, is the Professor of Practice of Medicine in the Georgia Eclectic Medical College.—RECORDER.)

OXALIC ACID IN LUMBAGO (?).

THE case reported on p. 257—RECORDER, vol. iv.—is valuable as showing how much better it is to prescribe for the symptoms than for the "disease" *from the diagnosis.* In the above instance the doctor made a masterly prescription—virtually "covered" his case, and with a remedy but little used. He had the usual reward of the *good* prescriber: entire relief in twenty-four hours.

But he is "astonished not to find *Oxalic acid* among the remedies to be considered" in lumbago. While grass grows and water runs he will *not* find it there—the genius of the remedy not including the rheumatic-sphere.

Dr. "C. F. M." really treated, and quickly cured, a case of spinal meningitis, as a thorough study of the pathogenesis of *Oxalic acid* will soon convince him. (Look up its toxicology!)

Some of the extremists in our ranks assert that no symptoms of any practical value are ever to be gotten from poisonings with material doses. Well, the first recorded symptom in Dr. C. F. M.'s case is "covered" to a dot in a fatal poisoning reported by Dr. Arrowsmith, *vide* Christison.

Oxalic acid has long been a favorite remedy with me in cardiac troubles occurring in highly "nervous" patients. In these cases it must not be mistaken for *Baryta carb.*, which also has an aggravation from "thinking of it." "Cover" symptoms ("with brains, sir!") to the dot over an i,—looking out for "fly-specks,"—and let the "diagnosis" go to the deuce.

S. A. J.

EXTRAORDINARY URINOSCOPY!

LONG before the year of our Lord 1000, he that was St. Gall, having received all the learning that the academies of Ireland could convey (and in those early days the Emerald Isle shone pre-eminent in letters), departed therefrom on a pilgrimage to Switzerland. "Wherever he sojourned," says an old chronicler, "his sanctified

department commanded pious respect; and having reached Switzerland, he there founded a convent to which he gave his name." This grew and flourished; and its annals, written by Brother Ekkard the younger, who died in the year 966, were published at Frankfort in 1661. In its pages is found the account of Brother Notkerus; and we deem it so curious that we shall give our reader a glance at him.

"Notkerus was both a monk and a physician, who, besides knowing something of theology and medicine, was a rare scholar, an interesting painter, and a delightful poet. So various were his talents that he relieved the sick monks, when languishing in their cells, with physic and prayers; he adorned the walls of the monastery with his pencil; he composed Latin hymns and chanted them in the chapel, and made the roof of the refectory ring with his wit. His pictures and poems have been suffered to perish, and the few remaining specimens of his jests are obscured by Gothic Latin; but two examples of his medical abilities have been preserved.

"Henry the Second, Duke of Bavaria, a person of some humor, consulted Notkerus about his health. He gave a feigned account of his complaints, and, according to the usage of these times,* showed him a bottle—but it contained a deceptious liquid. The monastic doctor alternately examined the bottle and the patient, scientifically and shrewdly. At length, bursting with inspiration, he exclaimed: 'Behold a miracle! an unparalleled miracle! A man, nay, this mighty Duke hath conceived, and in thirty days he shall bring forth a son, and suckle him at his breasts.'

"The detected Duke confessed his strategem to the priest of God; and the prediction was mysteriously fulfilled, nearly at the time foretold, by a fair maid of honor. Some temporary disgrace was incurred; but, through the earnest intercession of Notkerus, the Duke was appeased, and the lady, when recovered, was restored to favor at Court."

* * * * * *

By what "strategem" the noble Duke got that bottle of "deceptious liquid," and how the "fair maid of honor" left such "liquid"

---

* "According to the usage of these times." As the monk Ekkard died in 966, and as his chronicle was written still earlier, we see that urinoscopy was practiced some nine hundred years ago. In a paper by Dr. S. A. Jones, I recollect reading of an eighteenth-century physician who, by examining a man's week-day water, could tell what trade he followed, and from his Sunday elimination define his religion.

These things are enough to make our modern physiological chemists green with envy. This is one of the "lost arts" not mentioned by the late Wendell Philips in his famous lecture.

lying around loose, the good Brother Ekkard relateth not, and he is now too dusty to answer any curious inquiries. He, the humorous Duke, the "scientific" Notkerus, and the fair maid of honor, rest from their *labors* (especially the fair maid), and after nine centuries we read of their doings—thanks to Brother Ekkard's goose-quill.

*M.D.

NOTES ON THE TRANSACTIONS OF 1889.

The President's Address.

The address of the President, Selden H. Talcott, M.D., is good reading—inspiring, cheering—but RECORDER's space is limited and it is "practical," and must pick the practical plums.

Among other eminently practical things, Dr. Talcott said: "The Asylum at Middletown has flourished for more than fifteen years; and to this day it accomplishes a success which always characterizes a strict application of homœopathic medicines to the treatment and cure of disease. By way of episode we may here remark: The more carefully and persistently we apply homœopathy, the more successful are the results." These are the words of the physician under whose care the Middletown Asylum has attained a success unrivalled in history, and they are worthy of most careful attention, for, after all is said, "by their fruits ye shall know them." Good advice is given on the journal subject: "Let every journal stand or fall upon its merits, and let every member of the Institute take such journals, 'old school' or 'new school,' as he *pleases*."

Potencies and Dispensing.

DR. CARMICHAEL's paper, under the title of "The Pharmacy of Dilution," is a general shaking up of physicians, pharmacists and pharmacopœia makers. "By some the virtue of potency," said the doctor, "is supposed to depend on the amount of succussion; hence, some pharmacists lay stress on the fact that their potencies are hand-made, and that each one has received at least twelve powerful strokes or shakes. Other preparations received prolonged succussion on the machinery of a grist-mill, and still others are made in special apparatus where, by automatic arrangement, a receptacle is filled and emptied, and the liquid that adheres to its sides is supposed to contain the spirit or essence that impregnates the fresh supply. Some of these high potencies are 'run up' with alcohol, and others with water, except the final potencies, which are alcohol. The products of these various processes are alike in one respect, viz., that they are beyond the reach of all scientific analysis."

It is quite evident that the writer does not have a great deal of faith in high potencies, yet every reader of homœopathic literature knows that there are many physicians who have a most unbounded faith in them. It is not the RECORDER's purpose to take sides in this dispute, but to point out what should be plain to all, namely, that the pharmacist who starts with mother tincture and makes a first dilution, giving it "twelve powerful succussive strokes,"—by which is meant that the vial is corked, held firmly in the fist, and pounded twelve times on a stiff cushion,—follows this dilution with the second, and so on up, using nothing but alcohol and giving each dilution twelve strokes, has faithfully followed Hahnemann's directions; and if there is any virtue in high potencies, it will surely be found in those run up in this manner, the menstruum throughout being alcohol. As the one part to one hundred of each potency is mingled with the succeeding one, the vial containing it is corked, and the mingling is made beyond question by means of the strokes.

A pencil and a sheet of paper will show any one that potencies such as these cannot be carried very high. Allowing one minute for each potency would give sixty an hour or six hundred a day of ten hours—this estimate is excessive, but it will answer our purpose. At this rate it would take a little over five years to run up one remedy to the one-millionth, or nearly eleven years of unremitting labor to reach the two-millionth, which we believe is the highest yet attained. If we mistake not, the one-thousandth centesimal is the highest that any set of remedies have been diluted by the Hahnemannian process. Has any one ever realized what the one-thousandth centesimal means? A line of printing in the RECORDER contains say fifty letters; to fully describe the one-thousandth centesimal would take the figure 1/000—with forty lines of ciphers like these appended.

Dr. Carmichael thinks that tablets will, in time, supersede all other means of dispensing medicine, being, in his opinion, the most exact and convenient method yet discovered.

The Pharmacies.

Dr. E. M. Howard's paper was something like an unexploded shell—the fuse was there, but the Institute very wisely concluded not to touch it off. Dr. Howard got Dr. J. P. Dake, of Nashville, to purchase from different homœopathic pharmacies a line of six different tinctures, put a private mark on them or make a key, and then send them to him. The tinctures of nine of the best-known pharmacies were thus procured. No one knew, or we suppose yet knows, save Dr. Dake, whose tinctures they were. Of *Aconitum napellus* three out of the nine samples were pronounced by experts to be

"good fresh plant tinctures," five to be "probably from dried material" (fluid extract most likely), and one "a diluted root tincture." Tinctures from pharmacies I., V. and VI. were "good" throughout. II. was "good" in but three instances. III. furnished one "good" tincture out of the six. IV. furnished two "good" ones. VII. did not furnish a single sample that was pronounced "good." VIII. had four "good" (one of them, however, had an ? attached). Pharmacy IX. had two "good" out of the six. One pharmacy, IV., in addition to furnishing but two "good" tinctures, made an error in sending *cimicifuga* for *aralia racemosa*, which was ordered. So it seems that of the nine leading homœopathic pharmacies but three of them furnished tinctures that were in every case, "good, fresh plant tinctures."

A passage from Dr. Howard's paper is suggestive of the cause of this: "It is boldly claimed by agents of prominent old-school drug houses that some of our pharmacists are purchasing their fluid extracts and normal liquids in such large quantities that the presumption exists that they are using them in the manufacture of the tinctures supplied to our profession."

A Pharmacist's Paper.

Following Dr. Howard's paper is one by Mr. A. J. Tafel on "Homœopathic Pharmacy of To-day," which is well worth reading. Our purpose is not to go into detail but to touch on a few points of interest and value in the many interesting papers in the *Transactions*. The following from the paper under consideration is worthy of note: "Hahnemann's peculiar direction for making *Calc. carb.*, *Calc. acet.*, *Causticum*, *Hepar sulph.*, *Kali carb.*, and other preparations should be strictly adhered to. His *Kali carb.*, for instance, is as different from that of the shops as can be, and Dr. Korndœrfer, in an address read before the Hahnemann Club of Philadelphia a few years ago, justly maintained that the reason why so many practitioners failed to elicit the expected results on exhibiting that remedy was due to the fact that most of the homœopathic pharmacists failed to follow Hahnemann's directions in preparing it."

The Report of the Provers' Club.

This is of such a nature that an abstract cannot be well made of it. A set of rules have been adopted by which all provings should be conducted and reported. "Critical analysis" is the key-word. "Some earnest study and conscientious reflection will lead to the conviction that what we want is not 'contingent symptoms,' idiosyncrasies, or individual peculiarities, *but we want that, and only that, which is common to all.*" The report concludes with some caustic words for "book-makers" "who shall be nameless," and

seem to be numerous, who "have copied error after error, uncertainty upon uncertainty," and who have "not only copied these, but assiduously multiplied them by adding statements and interpretations, generalizations and sensational guess-work under the deceptive name of 'Key-notes.'" Condemnations of this sort are apt to leave the reader's mind in a state of bewilderment; he turns to his well-stocked shelves and suspiciously regards his books with a vague query, "who are the culprits?" They, like a crowd of boys, do not "tell" on each other.

Critical Analysis of Arsenicosum,* by C. W.

This is an analysis of thirteen provings, conducted according to the new rules. It concludes as follows: "In order that physicians may be able to make use of this proving, we give below the anatomical arrangement of such provers' records as appear to us as possibly and probably to have resulted from the effects of the drug:

"*Head.*—Dull, heavy headache in cerebellum, on motion; also dull, heavy headache in forehead and occiput (head feeling too full, as if it would burst)."

"*Gastric Effects.*—Hiccough, belching, followed by urging to stool, loss of appetite, feels weak. Nauseated, 'mean' feeling. Nausea and retching during stool. Head feels badly. Thirst, throat became dry. Burning sensation in stomach; passed considerable flatus."

"*Intestinal Tract.*—Four stools like diarrhœa, thin, watery, brown, painless, sudden, violent urging to stool immediately after dinner. Diarrhœa urgent, containing jelly-like lumps. Some pain in abdomen, below navel; urging desire to stool. Stool fecal, with mucus and blood; much tenesmus before and after stool."

"*Respiratory Organs.*—Symptoms too doubtful to include."

"*Urinary and Sexual Organs.*—(Urinates more frequently in the night. Seminal emissions. All doubtful effects of the drug.")

"*Skin.*—Too doubtful to include here."

"*Muscles, Joints.*—Long-continued rheumatic pains in the left shoulder. Intense tiredness. Pleurodynic pains in right and left sides of chest, sharp in region of left kidney, lower limbs, instep, scapula. (All to be further confirmed, as they resemble common, everyday sensations, and are found in every proving as well as out of it.")

Other Remedies.

The same paper contains reports of provings of other remedies. Of *Adonis vernalis* there were "two provings of ten-grain doses of crude drug (part used not stated)." One dose was taken and the

---

* As there is no such remedy as "*Arsenicosum*," we inquired into the matter and found that "*Zincum arsenicosum*" is meant.—RECORDER.

symptoms recorded for eleven days. "Dose of ten grains at 11.40 A.M. Increase of peristalsis of bowels while reading at 5 P.M.; slight glow of heat over body; abdomen bloated, and passage of hot flatus repeatedly in small quantities, somewhat offensive; head felt light, and some aching in occiput and nape of neck, with some stiffness. At 8 P.M. felt some pains in abdomen just above umbilicus, cutting in character, not relieved by bending forward; sphincter ani feels a little lax, as if a purgative had been taken. Later, during evening, some qualmishness at stomach, with belching of gas; head aches from occiput around temples to eye-sockets, across frontal region."

This remedy, it may be well to state, is not found in any of the homœopathic works except Arndt's *System of Medicine*. It is there highly spoken of as a remedy for dropsy and diseases of the heart, especially when the two are complicated. As prescribed there it is a mother tincture and is, or should be, classed by homœopathic pharmacists as an imported mother tincture. The old school uses the powdered dried leaves of the plant, which of course, is a very different thing from the homœopathic fresh plant tincture.

There were eight provings of *Lilium tigrinum*, but no results thought worthy of preservation were obtained. The amount taken was "five-grain" doses at four different times. The notice of these concludes as follows: "We would here record it as our opinion that the above proving, though of negative value, is one of the best, and deserves our unreserved praise, because every record springs from a sincere desire to tell the truth and avoid misleading exaggeration of style, and we sincerely hope to hear from such provers again."

The *Encyclopædia* devotes twenty-two pages to *Lilium tigrinum*. As used in practice the mother tincture is made (or should be) from the flowers only. The new *Hand-book* opens the paper on this remedy by asserting that "the provings of this drug have developed pressure, heaviness and symptoms of congestion of the pelvic viscera, especially in women. The ovarian pains are very marked. With the uterine and ovarian symptoms many reflex sensations are found, fluttering of heart, pain in back and extremities," etc. Also in one of those little gems in this work marked "Clinical" we find: "A large number of hysterical symptoms have been noted, associated with uterine derangements; for example, dread of insanity, great melancholia, with feeling that she is incurable."

There were nine provers of *Zincum metallicum* but "we scarcely have more than two whose records agree consecutively." A few symptoms only are given as possibly resulting from the drug. It will be remembered that in the *Transactions* of 1888, Dr. J. Heber Smith reported several cases of poisoning from *Zincum metallicum*,

even to death. It was reprinted in RECORDER for July, 1888, and is a most valuable paper and proving.

Zincum phosphoricum and *Zincum valerianicum* were also proved, but no results deemed authentic were obtained; such as they were, however, are reserved for corroborative evidence.

Chrysophanic Acid.

A very interesting paper on this drug was read by E. W. Beebe, M.D., of Milwaukee. *Chrysophanic acid* is an extract of Goa powder, a substance found in the wood of a Brazilian tree and long used in South America for skin diseases. A professional friend of Dr. Beebe who was troubled with marginal blepharitis, while preparing some of this drug for external use—one part to ten of vaseline—applied a little to his eyelid. The effect was immediate: "Marked conjunctival inflammation of the globe and lid, contraction of the pupils, with intense photophobia, the least ray of light producing great pain, which was intensified by a throbbing sensation, synchronous with the action of the heart; this was accompanied by phosphorescent flashes of light, like that from the application of a galvanic current. On forcing the eyes to look at objects in the darkened room, retinal impressions of them were left or retained for some time after closing them. There was swelling of the lids and irritation of the skin about the eyes." This continued about a week, after which there was a marked improvement and another and milder application effected a complete cure.

The remedy "seems best adapted to that variety of the disease known as blepharitis ciliaris, and should not be used in greater strength than one part of the powder to a thousand of vaseline, for fear of aggravations. It is not, however, in affections of the lids that I have been most pleased with its action, or where it promises to be of the greatest service. The array of symptoms brought out by the proving gives us a most complete picture of retinal asthenopia, or, as Graefe called it, optical hyperæsthesia, a condition which is difficult to cure, and for which we have but a limited number of remedies. In its action upon the retina, iris and ciliary body, it is an analogue of *Physostigma* and *Pilocarpin*, and should prove of equal value in affections implicating those structures, when its sphere of action shall have been clearly defined by thorough provings. It will undoubtedly prove of greater value when administered internally, and used as a collyrium in overtaxed eyes, than as a myotic, as its action is too violent when used in sufficient doses to produce its characteristic effect upon the pupil. I have given it internally in the third decimal in photophobia attending scrofulous ophthalmia, trachoma, keratitis, and iritis with seeming good effect, but I believe it more applicable to those of retinal asthenopia which are

caused by undue irritation of the ciliary system from straining the eyes, either by an intense or insufficient illumination."

In the discussion which followed the reading of this paper, Dr. A. B. Norton, said: "I have used *Chrysophanic acid* with success not only in blepharitis, but also in conjunctivitis and keratitis of the phlyctenular variety. I have also used it in cases of eczematous condition behind the ears. I use it locally as well as internally. I have not found any aggravation from its local use, and I have employed an ointment of the strength of eight grains to the ounce."

ON THE ACTION OF THE ALKALOIDS OF ASPIDOSPERMA QUEBRACHO.*

THERE appeared in the November number of the HOMŒOPATHIC RECORDER an item on the use of Aspidospermine in dyspnœa, etc. We have collected all the literature we could find on the action of the alkaloids for use and reference.

Hesse† has prepared from Aspidosperma quebracho, together with *Aspidospermine*, five other alkaloids, which he calls Aspidospermatine, Aspidosomine, Quebrachine, Hypoquebrachine and Quebrachamine, and which, according to *Penzoldt*, in doses of 0.01 to 0.02, cause, in the frog, paralysis of the motor apparatus, and then, next, of the respiratory apparatus, and, in larger persistence of the action, paralysis of the sensibility, which action, in Quebrachine and Aspidosomine, appears to depend upon the peripheric nerves, but in the remainder to be purely central. Quebrachine, Aspidospermine, Aspidospermatine and Aspidosomine also caused slowing and, finally, cessation of the heart-beat. Quebrachine, in the rabbit, caused motor paralysis in doses of 0.02 to 0.04; great injection of the ear-vessels and *dyspnœa;* also seen from Hypoquebrachine with less prominence, however, and after larger doses (0.08 to 0.12) of Aspidospermine. These symptoms were quite pronounced,

---

* Collected from different authors by Albert Peck and G. H. Pritchard, M.D., Boston, Mass.

† *Hesse, O.*, Studien über argentinische Quebracho-draguen.—*Annal. des Chemie*, Bd. 211, S. 249.

a. Botany and pharmacology of the plant may be studied from *Ther. Gazette*, September, 1880, p. 263.

b. Bordoni, an Italian, narrates on the action of Aspidospermine on the heart (Bordoni, Sull'azione cardiaco dell' Aspidospermine), reported in the *Bolletin 2d Soc tra i Cult. d. Sc. Med.*, in Sienna, 1886, iv., 396–405, but we cannot obtain it, unfortunately.

and precede paresis, while Aspidosomine and Aspidospermatine, in doses of 0.02 to 0.04, influence but little respiration and motility.

Neither the two alkaloids found in the red Quebracho, nor those of a Payta bark coming from an Aspidosperma, are identical.

The various bases brought into the market under the name of *Aspidospermine* and *Quebrachine*, should be regarded as mostly a mixture of the alkaloids isolated by *Hesse*, so that the experiments made with these have but little value (relatively).

In the experiments of *Petroue** with Extractum quebracho, in four cases of dyspnœa (in lung and heart diseases and asthma nervosum) it always had a palliative effect. Aspidospermine (of Merck), in 0.01 doses, does not act fatally upon frogs; also not upon rabbits below 1 kilogramme, and up to 0.6 on large dogs. Clinical experiments of *Marigliano*† show the Aspidospermine and Quebrachine (of Merck) to have, as well as the Extractum alcoholicum (of Quebracho), a slowing action upon the respiration, if it does not go past physiological bounds. This is less in Aspidospermine than in Quebrachine, and a retarding action upon the pulse (even 20 beats per minute), with integrity of the blood pressure, seen from subcutaneous injections in five to ten, and, in internal use, from twenty to thirty, minutes. *Marigliano* uses the extract in an indifferent vehicle, for therapeutic purposes, in doses of 10.6 Aspidospermine, 0.05 to 0.1 of the sulphate per day in pill form. Larger amounts cause gastric disturbances, as nausea, vomiting, or 0.05 to 0.1, subcutaneously, in an aqueous solution (1 : 10) does not produce local symptoms of irritation. To obtain a quick result from the remedy in asthma, he recommends Quebrachine hypodermatically.

Experiments by *Huchord*‡ *and*§ *Eloy*‖, made with alkaloids prepared by *Tauret* according to *Hesse's* methods, have shown that Aspidospermine is not the most poisonous alkaloid of the Quebracho bases; Aspidospermatine, on the contrary, is the one most profoundly reducing the temperature. Their experiments, under *Brown-Séquard's* eye, with the *Aspidospermine hydrochlorate* subcutaneously show that, in rabbits, the respiration increases five times, and in dogs three and a half times, in depth before the frequency

---

* *Petroue* (Linge, M.), *Sull'ozione fisio therapeutica della corteccia di Q. blanco e della Aspidospermina.—Nate Sper. Cliniche la Speumentols Agosto*, p. 129, 1883.

† *Marigliano, E.* (Genoa), Therapeutische Mittkeibrugen. Quebrecho, Aspidospermin and Quebrachin.—*Centralbl. f. die Med. Wissensch*, 43, 771, 1883.

‡ *Huchord et C. Eloy*, Recherches sur les alcoloides du Quebracho blanc.—*Bull. de la Soc. de Biol.*, p. 370 (1881).

§ Les propriétes physiologiquès, thérapeutiques et toxiques des alcaloides des Quebro blanco (Aspidosperma quebracho).—*Union Med.*, 18, p. 1001.

‖ *Huchord et Eloy*, Nate sur les propriétés antitheriniques de l'Aspidosperma quebracho et de quilques uns de ses alcaloids.—*Bull. de la Soc. de Biol.*, p. 426.

(in one-quarter hour) begins, and that the diaphragmatic and costal movements are not isochronous; that, in fatal poisoning, the blood (venous) is bright red, the temperature sinks, while, after subcutaneous injections of 0.01 to 0.02 of a mixture of the remaining alkaloids, a rise of temperature to 1½° and convulsions precede death due to asphyxia. The fall of temperature after Aspidospermine does not stand in direct relation to the size of the dose, which more influenced the rapidity of the sinking than its degree. But the rapidity of its elimination has to do with it, as in salivation the sinking was less. Hypoquebrachine also reduced the temperature; Quebrachine to a less degree.

Eloy and Huchord,* who investigated the action of Aspidospermine, Aspidospernatine, Quebrachine and Hypoquebrachine, have found it to have no action upon the mammalia as regards sensibility, but which, however, seemed reduced by the sediments from these alkaloids. Aspidospermine and Quebrachine, in some cases, increased the excitability of the phrenic nerve. As to motor nerves, they found Aspidospermine to produce, in small doses, trembling; in larger, convulsions; and in yet larger, rapid paralysis. All the other alkaloids had a paralytic action—Quebrachine acted more energetically and rapidly; the remaining alkaloids less so than Aspidospermine. The remains of the extract, free from alkaloids, also paralyzed, but produced convulsions. It is peculiar that hoarseness and aphonia are produced by the use of Aspidospermine, which *Eloy and Huchord* think due to a paralysis of the muscles of the vocal cords. Hypoquebrachine and Quebrachine had no influence upon circulation. Aspidospermine slows it; Aspidospermatine accelerates it. Quebrachine and Aspidospermatine do not influence the respirations, Hypoquebrachine only slightly, while Aspidospermine increases, for hours, the depth and frequence of the respirations, and large doses of the latter cause arhysthenia of the respirations. It is striking that the costal respiration is more rapidly or stronger attacked than the abdominal, so that the number of respirations is increased by 1:2 of the former, and 1:15 of the latter.

Hypoquebrachine and Aspidospermatine cause diuresis and diarrhœa, Quebrachine increased urination, and Aspidospermine salivation in dogs and increased diuresis in Guinea pigs and rabbits. The residue of the alkaloids was seen to be more poisonous than any single alkaloid; Quebrachine, Hypoquebrachine and Aspidospermatine more poisonous than Aspidospermine.

---

* *Eloy (Ch.) et A. Huchord*, L'ecorce et le principes actifo des Quebracho blanco. —*Arch. de Physiol. Norm. et Pathol*, noeucot 3, p. 237, 1886.

THREE CASES.

THE following interesting cases are from the Polyclinic of the Central Society, reported in the *Allgemeine Hom. Zeitung:*

CASE I.—A young woman of twenty-four years of age, otherwise healthy and without any disposition to sickness, was, fifteen months ago, delivered of her first child. In confinement she contracted mastitis, which turned into suppuration. The abscess was lanced by her physician and emptied, but the opening would not close in spite of all surgical and external means applied, and a thin ichorous fluid continued to form, so that the presence of a fistula could not be doubted. She received Silicea 30, a powder every other evening, and, after fourteen days, the opening was closed and the fistula healed and remained so. It would be difficult for the greatest skeptic to attribute, in this case, the cure to any other circumstances.

CASE II.—Meta K., aged nine and a half years, daughter of a merchant, came under our treatment after she had been under allopathic treatment for over one year. The anæmic-looking child, of delicate constitution, suffered, since her fourth year, from rachitic appearances, eruptions and swellings of the glands. These disappeared in course of time, with the exception of two carious ulcers on the sternum and a large swelling of the joint-ends of the upper part of the thigh bone. In consequence of this the lower part of the thigh was in an inflected position, and the knee-joint was almost ankylosed, so that the child could only creep, and had to be carried. There were no pains present. The suppuration of the carious bone swelling was as usual. The mark remaining from a previous bone swelling was yet deep, which is considered a sign of the continuance of the carious processes. There were no essential or characteristic symptoms present except a certain want of appetite. The patient was given, first of all, Calc. carb. 30, six globules, morning and evening, then one daily, then every other evening, and so forth, with longer intermissions for four months. After an intermission of one month we changed to Silicea 30, a few pellets every evening. The result is, that the bone swellings are entirely cured, and the existing marks have become flat, and that the raised joint-ends have been so diminished as to make the knee-joints again movable, and the lower thigh so straight that she can step already on one-half of the sole of her feet. The child thereby looks blooming, is cheerful, and develops a healthy appetite. We hope to procure for the diseased extremity at least the appropriate normal length by using a proper extension machine.

CASE III.—The third case is that of a likewise scrofulous girl of about four years of age, in whom the disease manifested itself, espe-

cially in swollen glands, eruptions and a certain vulnerability of the skin, and the usual concomitants, such as wilfulness and fretfulness, were developed in a high degree. The investigation showed the presence of a swollen and suppurating gland, for over a year, in the left axilla, a few gland-scars, a hard, painful scar on the left elbow, as well as dryness of the skin and very changeable appetite. Cod-liver oil and useless surgical measures were the weapons used, up to this time, to combat the affliction. The child was brought to us on account of a violent pseudo-erysipelas of the left lower arm, which was soon removed by Belladonna 6. Thereby encouraged, the mother asked us to treat the child for her other affliction. She received, first, Calc. carb. 30, two to three globules daily; later, Silicea 6, three drops, three times daily; then one dose of Sulphur 30 as an intermediate remedy; after which, again Silicea 30 every evening. After using these remedies for several months, there was observed, first of all, a favorable change, in so far as the wilfulness of the child disappeared gradually. She became cheerful and visibly stronger. The axilla-gland also diminished gradually, the suppuration ceased, and, after five months' treatment, closed entirely. The child looks blooming, is lively and strong, and her appetite is all that can be asked for. Whether the cure is a complete and lasting one, the future must tell, as sometimes, after years, the breaking out of scrofulous and rachitic sores prove that the disease germ in the body is not destroyed completely.

MULLEIN OIL.

By Wm. C. Wells, M.D., Hesperia, Mich.

The application of Mullein oil is of more general application than anything I have found in print. I report to you some cases:

Case I.—Mertie B., aged sixteen. Called to see her May 20, 1888. Found her suffering great pain in right ear. Parotid gland very much enlarged and painful. The right side of the head and face much swollen. Pulse about 100; tongue coated.

Treatment.—Mullein oil in the ear, and used as a liniment twice daily on the swollen parts. For the fever, Aconite. Great improvement during the first twenty-four hours, and on the 23d found the case convalescent.

Case II.—Carrie H., aged twenty-two. Her second child four weeks old. Called November 15, 1888. Right breast inflamed and sore. Two weeks previous it had been lanced by another physician, a little above the nipple, but now a place a little below and to the left of the nipple gives evidence of forming pus. I told her that in my judgment it had gone too far to check it then.

Treatment.—Mullein oil, one-half ounce in four ounces of water. Wet cloths and apply. The inflammation and soreness disappeared in one week, and by the use of the same remedy occasionally has entirely recovered without breaking. Her husband, when he paid me, said: "Well, you have done better than any of the rest of the doctors."

CASE III.—Linford S., aged sixty-four. Called to see him September 20, 1888. Has just recovered from typhoid fever, but is able to be around. Taken with inflammation of the right testicle. Swollen to the size of a goose egg, and much pain. Red and shining appearance of the skin. Cause unknown, unless it was in connection with chronic enlargement of prostate gland.

Treatment.—Mullein oil applied twice daily as a liniment. Mercurius sol. internally. In three days the soreness and pain had entirely disappeared, but the enlargement continued several days. He walked around with ease three or four days before swelling had diminished any.

CASE IV.—F. C., aged thirty. Called November 16, 1888. Found inflammation of left kidney and of left testicle. Had been under treatment by another doctor and had recovered partially, but relapsed. Suffering much with pain in testicle, which ran up the spermatic cord and through to the left kidney.

Treatment.—Cantharis and Aconite, as there was some fever. Mullein oil applied to the testicle. Rapid improvement during the first twenty-four hours, and made a quick recovery.

I have also cured a case of chronic inflammation of the eyes, and a case of chilblains from which the patient had suffered, during the winter, for about six years. . . . .

Every drug has its exact range. This one being new to the profession, we are just learning what it will do. In all these cases the Mullein oil has had an outward application twice daily.

[Enough provings have not been made to develop the full symptomatology of Mullein oil, but its chief sphere seems to be in urinary troubles. Clinically it has proven of the greatest value in that affliction of children so trying to both friends and physician, viz., *nocturnal enuresis.* Prof. Moffatt, of New York, has reported several cases of this sort in which the common remedies, Belladonna, Hyoscyamus, Causticum, Pulsatilla, Sepia and Sulphur, had failed, but which were promptly cured or very much improved by Mullein oil. It is also said to be highly serviceable in affections of the ear—applied externally—due to inspissated cerumen or dryness of the drum-membrane. It should be prepared from the blossoms—*Verbascum* is simply the alcoholic tincture obtained from parts of the green plant. Boericke & Tafel make a reliable preparation of it, and if any of our readers have had experience with the drug we will be glad to hear from them.—Editor of *Medical Counselor.*]

A New Diuretic in Heart Diseases.—To the indefatigable activity of Prof. Germain See, especially in this branch, we owe a new valuable remedy for persons affected with heart disease. The following is a *résumé* of his communications to the Academy of Medicine of Paris:

Milk is one of the best known diuretics. For a long time it has been the principal remedy in the treatment of stomach and heart diseases. But it so happens that sometimes patients refuse this beverage and fail to digest it on account of its massy coagulation in the stomach. For this reason a succedaneum has been looked for and *milk-sugar* has been thought of which, indeed, has given very satisfactory results. This substance, the other elements of milk (salts, fats, caseine) being excluded, has the greatest influence on urinary secretion. In doses of 2 litres milk increases diuresis; this is quite certain. On the other hand, in doses of 4 litres it causes glycosuria, a transient diabetes and a considerable secretion of urates, *i.e.*, a kind of disnutrition, a beginning inanition.

Milk-sugar allows us to avoid these inconveniences. In *doses of 100 grams per diem*, a powerful diuretic effect is obtained, more powerful than with 4.5 litres of milk. With it there is no more glycosuria, no more azoturia, for the sugar remains in the blood and the albuminates are not eliminated from the body. Two litres of a milk-sugar solution are equal in their effect to 4 litres of milk.

By the application of milk-sugar (100 grams per day), a polyuria may be produced which will soon exceed 2.5 litres per day, reach 4.5 litres on the third day, remain stationary for some time and then recede to 2.5 litres.

Milk-sugar, therefore, has a positive action on dropsy in heart diseases. Is this true also for dropsy in diseases of the kidneys? See doubts it. As a rule, the remedy is well supported. It is prescribed for *eight to ten days*. This is sufficient to produce a real dephlegnation of the blood and a kind of dessication of the tissues. After a few days of interruption it may be repeated.

In fact, milk-sugar is a physiological diuretic which acts more strongly on the kidneys than Strophantus and Digitalis, especially on dropsy in heart diseases.—*Proceedings of the Academy of Medicine of Paris*, June 11, 1889.

Infantile Diarrhœa.—JULY 2d, Mrs. S—— applied for treatment for her infant, aged nine months. The child was weaned at eight months upon the advice of some "old grannies," as the mother thought (?) herself again pregnant, although the child was doing splendidly.

After weaning, the child was fed on cow's milk, and any and *everything* it would eat. The period being that of dentition, and in

connection with the kind of food it was receiving, and the weather not being at all conducive to good health, a severe and very debilitating diarrhœa set in the second week after weaning. The symptoms were as follows: Bowels move several times, at short intervals, just as soon as child wakens in the morning, from 5 to 5.30 o'clock, then moving but once or twice until next morning; stool very large, watery, yellow, painless, odorless; child looks old and careworn, with peevish tendency.

Treatment.—Podophyllum 6x tinct., a powder every two hours, and change diet to Alpine Cream-Milk, to be given according to printed directions.

July 27th.—Bowels are regular, appetite good, child looks healthy and vigorous. The *peculiar* point to me in the above case is the *very decided* time of aggravation; then the bowels move several times in quick succession, then nothing more is heard of the trouble until next morning, *always beginning when child wakes up.* The generally accepted and verified time of aggravation under this remedy is, "In the morning; in the night; during hot weather," yet very different from above case.

Then the Podophyllum stool is always supposed to be *very offensive*, but in this case stools odorless. In this case, when I first looked at patient, I at once thought of that "old reliable," Argent. nit., as the child presented that old, withered look, most remarkable in the *limbs*, instead of "legs," under Argent. nit.

Question: Would child have regained its health by simply changing its diet, without medicine? Or, did the change in diet assist in its own way the curative action of the drug?—L. L. Helt, in *Am. Homœopath.*

VETERINARY DEPARTMENT.

A Case of Asthma.

EDITOR OF HOMŒOPATHIC RECORDER:

The writer of this is not a doctor, nor a veterinarian either, nor—what would you call a bird doctor? At any rate, our Don had a bad attack of asthma, if I am not astray in my diagnosis; he would wheeze in his breathing and often sneeze; the wheezing was especially noticeable in the morning, or after a rapid flight around the room. Don, I should say, is a full-blooded canary with a mind of his own; he loves his friends with a lively affection, and he cannot, apparently, scold enough to express his hostility when any one he dislikes approaches his cage. The asthma grew worse and the bird's

voice was much impaired. I heard from a friend who discovered it—I don't know when or how—that *Corallium rubrum* would cure asthma in birds. I got a vial of it in 3d trituration and gave some to Don; had no need to put it in the water-cup, as he greedily picked up all given him. The next morning after the first dose his asthmatic breathing was much less noticeable, and in a few days it had passed away entirely, and Don's voice can be heard all over the house now. *

Calving.—The *Hom. World* furnishes the following interesting item: "Farmers are looking with more favor on the homœopathic treatment of cows. Mr. George Simpson, of Wray Park, the well-known raiser of Jersey cattle, is one, and his mode of treating cows cannot fail to be interesting, not to say useful. To an inquiry how he treated a cow suffering from milk fever, he replied: 'We do not now use Aconite before calving, but give 10 drops in 2 ounces of water twenty minutes after calving, and repeat in two hours; then 10 drops of Belladonna, and keep on giving first Aconite and then Belladonna every two hours for twenty-four hours, then drop to every four hours till about thirty-six hours after calving, and then discontinue altogether. We never wait for symptoms, but treat all cows alike, not heifers. If the cow shows signs of mischief we give the medicines every hour, and sometimes oftener; then we drop the Belladonna for a bit and give only Aconite. After a bad case we give them every four hours, about three doses in all, as a tonic.' From the number of applications which Mr. Simpson receives, there is evidently a strong desire to try the homœopathic treatment."

Lame Horse Cured.—Last winter (1888–89) Mr. D., a Chester County, Pa., mill owner and farmer, was engaged in repairing and strengthening his mill-dam. He employed two horses in hauling the necessary stones and timber. While pulling a heavy load one of the horses slipped on the icy ground and badly sprained his hip. None of the ordinary remedies usually employed in such cases did any good, and summer came and the horse was still lame; after a long rest he was especially so, and also if worked too hard, for he was worked to some extent. Early in the fall one of Mr. D.'s sons, who had some knowledge of homœopathy, visited his parents and heard the story of the lame horse and saw his symptoms. These, in his judgment, indicated *Rhus tox.*, and he prescribed that remedy, 3x, twice a day for two weeks; great improvement. He then changed to the 30th of same remedy. In a month the cure was complete. One noticeable feature of the case was that after improvement set in, a hard lump, about the size of a walnut, grew out under the skin over the joint sprained, but, without breaking, it went away again when cure was complete.

Hide-Bound.—Homœopathic veterinary works speak of this trouble as a symptom of some disease, and give but slight, if any, treatment for it. If it is but a symptom it certainly is a very decided one. In vol. i. (1846) of the *Transactions* we find the following in Dr. Jacob Jeane's paper on *Lobelia inflata*: "A Charles Whitlaw tells, in the London *Lancet*, a queer story about hide-bound cattle seeking and eating the *Lobelia inflata*, becoming salivated, and then getting well." This is all to the point in question, and it is quoted from a treatise by Dr. Alphons Noack, of Leipsic (1841), on *Lobelia inflata*. This mere hint we accidentally stumbled across in that fine old work—for vol. i. of the *Transactions* deserves the name—and reproduce it here in the hope that some reader having a hopelessly hide-bound horse or cow may give it some heroic doses of this remedy and report the result to the RECORDER. *Apropos* of heroic doses, Thompson, the old Thompsonian Thompson, terror of the youth in by-gone days, who claims to have given the world this remedy, relates the following: While a boy he discovered the properties of *Lobelia* and "used to induce other boys to chew it, merely by way of sport, to see them vomit." One day—he must have been older then—"when mowing in the field with a number of men I cut a sprig of it, and gave to the man next to me, who ate it; when we had got to the end of the piece, which was about six rods, he said he believed what I had given him would kill him, for he never felt so in his life. I looked at him, and saw that he was in a most profuse perspiration, being wet all over as he could be; he trembled very much, and there was no more color in him than a corpse." A most lively vomiting followed and some two hours afterwards he said "he never had anything to do him so much good in his life; his appetite was remarkably good, and he felt better than he had for a long time." This also is from Dr. Jeane's paper, and while it has nothing to do with hide-bound cattle, we could not refrain from quoting it.

Quarter Crack—*Equine.*—Herr O. had me called to a horse which had suddenly gotten quarter cracks upon the inner side of the fore hoofs. On examination I found the fissure to extend from the edge of the hoof to the border of the hair. The edge of the corona was torn, and bled somewhat. This was the condition of both hoofs. The animal was quite lame, and could scarcely be induced to come out of the stall. I had two small linen cushions, provided with broad straps, and had them dipped into Arnica-water (1 tablespoonful to a litre of lukewarm water), laid upon the diseased parts and bound on by means of the broad straps. These cushions were moistened five or six times daily. Then the hoof was kept soft by means of an Arnica hoof-salve, rubbed in. Dur-

ing the process of treatment the horse was kept tied up well and highly, and was not let to lie down. Internally, I had Scilla 3x four times daily, given in doses of 10 drops. After about ten days the crack above was seen to be nearly healed, and the process of healing was seen to be progressing distinctly. As the owner of the horse was obliged to use the animal then as a buggy-horse, I had closed shoes put upon the horse's feet, and the seam filled with wax so that no dirt could penetrate into it. Thus the animal remained continually in use; the compresses and the inunctions were still applied daily while the animal was at rest, and after about seven weeks the two hoof-cracks were nicely healed. They will entirely disappear when the hoof will have grown down further.—F. Fischer, in *Ztschr. für Hom. Thierheilkunde*, 1888.

On the Epizootic Aborting of Cows.—The epizootic aborting of cows has already been described, and its infectious character determined. Brauer recommends a method of treatment which has been given a long and faithful trial. It consists in the subcutaneous injection of 2 to 3 Pravaz syringes full of a 2 per cent. solution of Carbolic acid every fourteen days, at the time between the 5th and 7th month. The results obtained by him by this method were extremely favorable, and he quotes a series of cases successfully treated in his own and others' practice.

As regards the cause, he thinks the condition is one of general infection, and the micro-organisms (pathogenetic) are only secondarily localized in the placenta. He finds a confirmation of this in his success in treating the disease by his method, for the small amount of Carbolic acid introduced into the circulation is sufficient to so influence the micro-organisms' soil, or change the conditions so that development of the same is prevented.—*Zeitschritte der Medicine*, Bd. 7, 1889.

Veterinary Practice.—Herr Baron v. K. asked me to examine a horse, which he had possessed for some time. It stopped eating a few days ago, seems to have appetite, but it is impossible for it to chew. Besides, it trembles often, as if it would have fever and would not move from the spot during riding, but seems rather exhausted. An examination of the horse in the stable of the gentleman revealed the following: The horse stood with the head hanging down, showed no inclination to eat, but increased thirst. Respiration somewhat increased, pulse 70 (per minute), temperature 40° C. The temperature of the body was increased warm, the mouth hot, and if one introduced his hand into the mouth it seemed to be disagreeable to him. The mucous membrane of the mouth was found hot and dry; the palate reached over the incisor teeth. Fæces small, formed

into balls, and dry, dark-brown—secretion of urine decreased in frequency. The skin showed itself to be dry, closely adjacent to the subcutaneous tissue, and stiff.

This condition of the horse was incomprehensible to the possessor, and a veterinary surgeon, consulted by the servant, had already diagnosed this condition to be pneumonia, and ordered inunction in the region of the ribs, which was, however, not allowed to be followed out by the owner. Internally he had prescribed: ℞. Tart. stibiat, 2.0; Dispensatur tales doses X, viz.: Tartar emetic, 2 gr. (?) Of such powders ten pieces were to be made; the horse was to receive one powder with a little water every two hours.

I abstain from any criticism of this treatment and leave it to the judgment of the reader.

The powders were not administered, but Herr v. K. consulted me now. It was easily stated that we had to deal with a febrile condition, but it could not be foretold what the consequence would be. That no pneumonia was present was evident, but my experience told me that such a condition precedes often an exanthem.

In order to reduce the fever no better remedy than Aconit. napellus could have been given. It is the first remedy which must be always employed in all disturbances of the circulation, and has proven to be of especial value in febrile exanthemata. I prescribed Aconit napellus, on account of the very acute condition, in the first decimal dilution, 10 drops in a little water, every hour. In addition to this, rest in the stable and partial darkening of the same. I gave pure water to the patient *ad libitum*, and had it often renewed. On the next afternoon, when I visited the patient again, I found the same much quieter; pulse 45, respiration normal, fæces of a brownish color and covered with mucus, temperature (in the rectum) 37° C. From the mouth ran a thick mucus, and on examination of it I found the mucous membrane of the same covered with small and larger vesicles. I now prescribed Aconit. 3 dil. with Acid. nitricum 3 dil., in alternation, every two hours. On the next day most of the vesicles had discharged their contents, and small open spots could be observed. The condition of the animal was perfectly vivacious, only the food could be digested but slowly. Temperature and pulse were now normal. Aconitum was discontinued; but Acid. nitricum continued in three-hour intervals. The course was now a normal one; after eight days the patient was discharged from the treatment and was ridden on the next day by its possessor.—H. Fischer, in *Zeitschr. für Hom. Thierheilkunde*, 15, 1889.) P. AND P.

Basedow's Disease in Animals.—Jewsejeuka, after giving a review of the symptoms which Basedow's disease presents in man, describes two cases, one in a horse and one in a dog.

The dog showed symptoms which were taken for epilepsy; epileptic spasms with consequent anæmia and excitability, constantly lying down, frequent groaning, temperature 39° C., palpitation of the heart and increased pulse-rate; in the region of the base of the heart a soughing with a metallic sound, slight swelling of the right portion of the thyroid gland, an urticaria-like eruption over the whole body, diarrhœa and loss of appetite. It was much improved by proper treatment for about three weeks. The symptoms respectively disappeared, but returned with renewed violence especially the palpitation; the thyroid gland began to increase into a firm and compact tumor, and both eyes began to protrude from their sockets. By the internal application of Kali jodide with a salve of Kali jodide and Belladonna externally, and injections of Iodine into the thyroid gland, recovery took place in about two months.

The second case was that of a race-horse, which, after a violent exertion upon the race-track, suddenly took sick, exhibiting but increased thirst, loss of appetite and weakness at first. The veterinary surgeon, later called in, found, with a temperature of 39.8° C., violent palpitation of the heart, increased respiration, swelling of the thyroid gland, œdematous swelling of the eyelids, and decreased sharpness of sensorium, and diagnosed a brain disease. A consultation with three other veterinary surgeons diagnosed a distinct exophthalmos, immobility of the eyes, a tumor-like enlargement of the thyroid gland, soughing, systolic murmur at the base of the heart, small pulse, temperature 41.1°C., etc. Death. *Post-mortem* examination unfortunately not performed.—*Fottschritte der Medicin*, April 15, 1889.)

P. AND P.

LETTER FROM DR. YINGLING.

NONCHALANTA, KAN., November 25, 1889.

MESSRS. BOERICKE & TAFEL, Philadelphia, Pa.

Gentlemen: I send herewith one dollar for the HOMŒOPATHIC RECORDER for 1890.

The RECORDER gives me much information. I like the veterinary department.

My herd of cattle was taken with the mange last spring, and every hoof was almost a solid scab from horns to tail. I gave them an ounce of *Sulphur* 3x in my tank containing about 35 barrels of water. Three doses effectually cured the herd. My work-horse was taken with sore eyes; *Euphrasia* 3x cured. *Nux vom.* 3x cured the rough hair and general decline and indigestion of my driving-mare. A fine cow aborted; placenta retained; hollow eyes; high fever; *Puls.* 3x in a few hours cured. A choice calf had diarrhœa; sunken eyes; excessive weakness; dirty yellow, offensive discharge; all

said it would die. *Arsen. alb.* 3x cured in a couple of days. Calf became the largest of the herd. I depend on homœopathy for all such cases; it never fails me.

Yours truly,

W. A. YINGLING.

BOOK NOTICES.

Eating for Strength; or, Food and Diet in their Relation to Health and Work, Together with Several Hundred Recipes for Wholesome Foods and Drinks. By M. L. Holbrook, M.D. New York. 1888.

Dr. Holbrook is known in the book world through his *Parturition Without Pain*, published in 1871. The object of his latest work, *Eating for Strength*, is to present the most recent facts of science concerning food "in a way to make them valuable for actual use in daily life. There is no doubt but man may double his capacity for work and for enjoyment by improving his dietetic habits. Many have already done this, and multitudes more are only waiting for the knowledge which will help them to do it." To impart that knowledge is the object of this book. It is on the same line as the works of Luigi Cornaro, written four hundred years ago—more scientific and less poetic, but teaching the same lesson, *i.e.*, that nearly all our physical ills spring from excess in eating. The good prohibitionist will be shocked to learn that his methods of promoting temperance are but vanity and vexation of spirit, for, acquired habits aside, the craving for stimulants is the result, according to Dr. Holbrook, of excessive indulgence in the wrong sort of food. Those who want to know what is the right sort must go to the book itself. If the advice is followed, the American nation need not fear cheap Chinese labor, for a Buffalo, N. Y., gentleman relates his experience, covering six years, of living on a diet that costs him from two to twelve cents a day, and "there is not wealth enough in the State to hire me to eat and drink as do the average of mankind." The chapter on fruits, and the beneficial effects of the use of ripe fruit in diseases where the average doctor prohibits them, is well worth considering by the medical profession. The book teaches many valuable lessons in diet, and all will admire the beauties of dietetic temperance, but few will follow them. When the man of the present, as did he of the past, gets wolfishly hungry, he wants beefsteak, and not bread and apples—and is going to have it. But notwithstanding that, the book is a good one for every one to read, for dietetic intemperance is worse than drink intemperance. (The book contains 246 pages; retails for $1; postage, 9 cents. Net price to physicians, postpaid, 89 cents.)

Consumption: Its Cause and Nature. By Rollin R. Gregg, M.D. To which is added the Therapeutics of Tuberculous Affections; by H. C. Allen, M.D., Ann Arbor. 1889. 477 pages.

This work is copyrighted by Hattie E. Gregg, wife of the author, deceased, and, we are informed, published for her benefit. In the preface the author says: "Strangely enough, in all the investigations and considerations of the subject, it seems never to have occurred to any one to account for anything in consumption but the tubercle; and yet there are many serious and alarming accompaniments of the disease which are only secondary to the tubercle in their ominous indications, and which, indeed, are sometimes just as serious in what they mean." These indications, which rather precede than accompany the tubercle, are "the great emaciation" which appears even while the patient still eats heartily and digests well, the "too watery blood," "the night-sweats," "the fatty liver," "the scrofulously enlarged joints and the thickened, curved and ridged finger-nails, besides other things that are quite as characteristic of the consumptive subject as almost anything else in his disease, but which, it is reported, nobody seems ever to have thought of taking into account, or, at least, of accounting for the cause, in the many theories of tubercle." By a knowledge and mastery of these forerunners of the final symptom, the physician may hope to successfully combat it. In the first paragraph of Chapter I. occurs the following: "I am now prepared to reaffirm, even more positively than ever before, that the *cause* of consumption *is a loss of albumen from the blood through irritated and abraded mucous membranes.*" Italics are Dr. Gregg's. The first 179 pages are devoted to establishing the theory we have so briefly outlined, and to a general view of the treatment of the disease, for which there is "a rational ground for hope" that a large majority of the cases are curable. The "inhaling remedies" are absolutely and unequivocably condemned. "The lungs were made to inhale air and nothing else. And he who violates this organic principle of nature will surely be made to pay the penalty." The remainder of the work is "The Therapeutics," by Dr. Allen, the "Repertory" occupying 105 pages. The book is very well printed, large type and good paper. (The price is $4 *net*. Cloth. Postage, 20 cents.)

Counsel to Parents, and How to Save the Baby. By I. D. Johnson, M.D. 1889.

This is a new book by the writer of the well-known *Johnson's Therapeutic Key*. It is dedicated "To the Woman's Christian Temperance Union." The author, in his preface, says of the work:

"The subjects brought forth are of paramount importance not only to parents, but to all classes of society, and especially to the *youth* who, through ignorance of the information it imparts, are making wrecks of themselves physically and mentally. It discusses the marital relations, points out the sin of sexual excesses, exposes the common vices of youth, and warns the offender of his impending doom." There is a great deal of practical advice on the management and feeding of infants in the book that will make it of great value, especially to young mothers. What is said about over-feeding infants, and of offering them pure cool water regularly to quench their thirst, is golden, and, if followed, would doubtless lessen the infant mortality. But the "hints" to young women and men about to marry are—well, in brief, here they are: Young woman, don't marry a man who uses tobacco, who drinks any kind of alcoholic liquor, who is lustful, an invalid, is stingy, a "dude," or who is under twenty-three years of age. Young men are advised not to marry a woman whose temperament is very similar to his own, who has a small waist, pale, delicate, of a family tainted with consumption or epilepsy, and, finally, "never marry a woman without first telling her everything you know about yourself." If this advice were to be faithfully followed by all men and women, the shade of Malthus could rest tranquil. (The book contains 224 pages, and sells for $1. Net to physicians, post-paid, 86 cents.)

Dr. E. R. Ellis has brought out a new edition, the seventeenth thousand, of Dr. John Ellis's popular *Family Homœopathy*. The author long since gave up practice for the more lucrative business of manufacturing lubricating oils, but allows others to bring out his works, two of which, until recently, were out of print, *i.e.*, *Family Homœopathy* and *Avoidable Causes of Disease*. Both are obtainable now, and the price of each is $1.50, less .20 to the profession. The present edition of *Family Homœopathy* has a picture of the author for frontispiece.

Drs. Boericke and Dewey promise us a new edition, the second, of their well-known work, *The Twelve Tissue Remedies*. This new edition is to be new, not only in name, but in fact as well, as it will be "entirely rewritten, containing everything pertaining to these remedies and the biochemical method published up to date." The new edition will be ready about February 1st.

Dr. Wm. Boericke is at work on a new American edition of Ruddock's *Stepping Stones*, which will be improved and enlarged by the addition of the *Tissue Remedies*.

A new edition of *Lilienthal's Homœopathic Therapeutics* will soon be forthcoming.

PUBLISHERS' DEPARTMENT.

ACCORDING to our usual custom, subscription blanks are put in all the copies of this, the first number of Vol. V., by the binders. Those who have already paid for the volume in question hold receipts for same, and are not called upon to take any notice of these blanks. Those who have not paid, and who wish to receive the RECORDER regularly, will, we trust, fill them out and make prompt remittance. If more convenient, subscriptions may be paid at any of Boericke & Tafel's pharmacies in person.

A Lost Remedy.—During the summer of 1888, while the yellow fever was prevailing in Florida, a physician inquired at Messrs. *Boericke* & Tafel's Arch Street, Philadelphia, pharmacy for a remedy the name of which he did not know, nor any particulars concerning it further than that he had once read a paper in which it was stated that the unknown remedy had been used in Cuba with most remarkable results in the treatment of yellow fever. Inquiry into the matter was rewarded by the following items, furnished by Dr. E. Fornias, of Philadelphia:

"It was in 1873 that I heard of the wonderful cures of yellow fever (*Vomito Negro*) made by a remedy discovered by Dr. Victor Iturralde. I wrote to a brother-in-law of mine, who was then Commissary of War at Santiago de Cuba, and through his influence obtained a supply of the remedy from Father Callejas; but I left Cuba shortly afterwards, and have never had a chance to test it.

"The history of the remedy is as follows: The day before leaving for Spain, on account of ill-health, Dr. Iturralde placed in the hands of the venerable Father Callejas some of this remedy to try in the terrible disease, and at the same time said that it was made from a plant growing in Cuba, and carefully prepared by him. He refused to give its name, stating that the twenty-two cases he had treated, without a single death, was not, in his estimation, sufficient proof of the curative power of the drug. Dr. Iturralde begged Dr. Callejas to employ the medicine during the then prevailing epidemic, and, after exchanging views in regard to the success obtained, he would then give the name of the plant, and announce its virtues to the medical world. Unfortunately, however, Dr. Iturralde died shortly after arriving at his native land, and carried with him to the grave his secret.

"In the meantime, Dr. Callejas (for he was a doctor), associated with Dr. Navarro, Dr. Giron and Dr. Avilés, obtained wonderful results. The last of these alone treated *one hundred and three cases* at

the Charity Hospital with *only two deaths*—one, who was admitted in a dying condition, the other, from excess in diet during convalescence. Father Callejas, in his great enthusiasm, goes so far as to proclaim it a sure *prophylactic.*"

This is about all that is known concerning this lost remedy. If it could be found again, and would bear out the claims made for it, the discovery would be an epoch in medicine. The only known supply is that mentioned by Dr. Fornias, which has been run up in dilutions, but is too high, probably, for proving. We publish this in the hope that a wider knowledge of the facts may lead to the hoped-for discovery.

A Growing Fad.—The trick of showing up the inconsistencies of the medical profession seems to be a growing one. A year ago, it will be remembered, one of the "great dailies" of Chicago got off the abortion sensation, and plumed itself on its virtue, no doubt—how benignantly Mephistopheles must smile when a "great daily," after lugging some moral or physical nastiness to light, poses as a "moral" agent.

Then a New York paper turned its female reporter, Nellie Bly, loose on the M.D.'s of that town. The Nellie Bly of the old song used to shut her eye, but the latter day Nellie shut the doctors' eyes. She wanted a prescription for a bad cold, and got a dozen of them and then published them, and each one was different, as a matter of course, for they were all Regular.

And now comes Dr. S. E. Chapman, of California, who has spent time and money to demonstrate that the regulars are, in reality, irregular—regular guerrillas, in fact. He wrote a letter detailing certain symptoms, and asking for a prescription for them, and sent a copy of it to ten prominent homœopathic physicians in various parts of the country, and to an equal number of the regulars or, as he calls them, the allopaths. In each letter he inclosed two dollars to pay for the prescription. The ten homœopaths promptly replied, and every one of them prescribed *Lycopodium.* Of the others, one refused to prescribe without seeing the patient, another made no reply, while the eight others sent in eight different prescriptions. One gentleman certainly earned his money; he gave a prescription to be taken before meals, one after meals, and two, if needed, before bed-time. These four are made up of Cinchona, Gentian, ac. hydrochlor. dil., pepsin, Bismuth subnit., Pulv. glycyrrh., Aloe socotrine, Podophyllin, Ipecacuanha, Nux vomica, Hyoscyami and Colocynth. Among the others we note, in addition to the foregoing drugs, Peristaltic lozenges, Ac. muriatic dil., Syrup aurantii, Lady Webster's Dinner Pills, Salicin quin. sulph., Aloin, Lactopeptine, Aqua cinnamon, Strychnia Sulph., Quinine sulph., Pil. Rhei Co., Potassii cit., and Sodii phos.

A number of these remedies appear twice. It is but fair to add that one of the homœopathic prescribers remarked to us that the symptoms were so plain that no homœopathic doctor could mistake them. But this only makes it plainer to all that the paths of homœopathy are so regular and clear that no one can "err therein," while those of the regulars are such a maze that no two can walk side by side in them, but must constantly cross each others tracks while seeking a common goal. No wonder the demand for homœopathic text-books and medicines is increasing among physicians of other schools.

Jamaica.—In a letter we recently received from the Rev. E. E. Reinke, Hope, Spur Tree P. O., Jamaica, West Indies, occurs the following: "There are plenty of plants here in this beautiful and tropical island that could be proved to advantage, having long been used as 'simples;' beautiful climate and scenery, steam transport, etc. Some of the American Institute men should be deputed to investigate, or some of the hard-worked doctors should come here to recuperate and botanize."

If any of our readers want to take a run to the tropics, doubtless Mr. Reinke would be glad to correspond with them, and the RECORDER to chronicle anything of interest to homœopathy they should find in the land of endless summer. Opposite to the name of the remedy *Calotropis*, in an order for medicines, Mr. Reinke puts the following note: "For leprosy—I have tried it, and found it good."

Nuphar Lutea.—This old remedy, the yellow pond lily, is worth considering in reference to its action on the sexual organs. It is claimed for Nuphar, by the eclectics, that it allays abnormal sexual excitement and irritation, is valuable in spermatorrhœa and, in strong doses, controls satyriasis and nymphomania, and will often cure prostatorrhœa after other remedies have failed. Allen's *Handbook* says nothing of the remedy, but his *Encyclopædia* gives a proving by Dr. Pitet (*Journ. de la Soc. Gal.*). In the part relating to "sexual organs," we find the following: "Complete absence of sexual desire; penis retracted; scrotum relaxed (eighth day). Entire absence of erections and sexual desires; *the voluptuous ideas which fill the imagination do not cause erection* (tenth day). Continued absence of erections and sexual appetite (eighteenth day). Diminution of lascivious thoughts and the sexual inclination for some ten days; opposite effects during the succeeding days."

Farrington only mentions it once, in five lines, and says it "seems to cause nervous weakness."

Hering does not mention it.

Hale, *New Remedies*, says it "has been used in medicine by all nations." Also "The ancient physicians, among them Dioscorides

and Pliny, mention the depressing action of this plant on the generative functions."

Dr. Petit, who proved the remedy, reports a number of clinical cases where he employed *Nuphar*. One of these was "a patient convalescing from typhoid fever, whose feeble state was aggravated by nocturnal emissions." These gradually diminished and disappeared under a few doses of *Nuphar* 6, for several evenings. Another case reported was that of a man who for nine years had suffered from involuntary seminal losses during sleep, at stool and when urinating; he was pale and languid; he took *Nuphar* (strength not stated), two doses a day for thirty days. "His paleness diminished, his general weakness disappeared by degrees, and his digestive functions took a new start; at the same time the pollutions ceased, erections came on, accompanied by a decided propensity for the generative act, and before the thirtieth day of the treatment he was able to satisfy it with success and without fatigue." The remaining cases are those of "morning diarrhœa" in which *Nuphar* is eminently successful.

Hughes only speaks of Nuphar in connection with morning diarrhœa.

Such in substance is about all we can find concerning this remedy. It is an imported mother tincture.

Melilotus Alba.—Dr. Bowen (*Medical Advance*), finds *Melilotus* to be a most valuable remedy for insanity. He prescribed it in all cases to reduce the hyperæmic condition of the brain, thinking he would use the indicated remedy as soon as acute congestion was removed, but found that *Melilotus* cured the entire train of mental symptoms and restored the patient to health.

Apples.—In Holbrook's new book, *Eating for Strength*, we find the following quoted from Joel Benton: "Curiously enough, the apple has a very pertinent relation to the brain, stimulating its life and its activity which it does by its immense endowment of phosphorus, in which element it is said to be richer than anything else in the vegetable kingdom. But phosphorus is not only brain-supporting; it is *light-bringing*, and thus contributes to knowledge. The apple follows the belt of civilization, the zone of intellect, or else is followed by it."

The Old Story.—We take the following from a letter from Kansas: "Please send me one copy of Wm. J. Guernsey's Card Repertory on Diphtheria. We are having a serious siege of diphtheria, but I am happy to say that in my practice (homœopathic) I have lost but few patients; but, Oh dear! with the so-called

'regulars' the mortality has been terrible. One would think that in time even the most bigoted allopath would have his eyes opened. This occasionally happens, and in proportion as the enlightened one smuggles homœopathic remedies administered on homœopathic principles into his practice so far does his fame as a successful physician wax great."

Highways and Byways.—One thing leads to another. The safety bicycle has come to stay, and on it the timid, the men of portly presence whose bump of assimilation is well developed, the awkward squad—every one, in fact, may ride (granting ability to purchase) without danger of breaking neck or bones. Of course even a safety may toss a man or, what is the same, and perhaps more accurate, he may tumble off, but the fall is not apt to hurt anything save the fallen one's pride, and even this, with the lungs full of pure air and the blood coursing swiftly from the breezy exercise, is not apt to suffer much. The safety bicycle has led to a call for better roads, not only better highways but byways as well, and the organized wheelmen have set about educating the public sentiment on this point. The RECORDER feels like giving them a helping hand in this matter, and is almost if not absolutely sure that the county doctors *en masse* will give their moral, and many or most of them their active, support to this laudable work.

The people of the United States are mad for railroads until they get them, and thereafter are in a chronic state of mad *at* them, for it is a well-known fact that there is not a community in this country, from big New York down to Huckleberry Metropolis, that is not "discriminated" against and having its trade ruined by the naughty railroads, and this notwithstanding the fact that freight on a barrel of flour has fallen from $1.50 in *antebellum* days to 25 cents or lower in our day, and carried in one-fourth of the time. There is fallacy somewhere if we could only find it, and we think it lies in bad roads. And if communities and men would cease for a time their striving after "competing railroads," when rates are as low now as they can be, and have the railroad live and be kept up, and put one-tenth of the money so wasted in good local roads and cross-roads leading from their respective towns, the country would soon be covered with a network on which the public could snap its fingers at the railroads. Think of being able to start from any point and go north, south, east or west, on hard smooth roads, good at all seasons, stretching from one town to another on to the border! Think of what enormous tracts of country could be opened up to commerce and pleasure even in our oldest States were each town to spin a spider-like network of superb highways and byways around itself! Could such a state of affairs be brought about, we verily believe the con-

stant cry for "more railroads" would cease, that "time would run back and fetch again the age of gold;" when men travelled in their own conveyances or bestrode their steeds, breathed the pure air and saw something of mankind and nature while on a journey instead of sitting cooped up in a hot car ruining their eyes by poring over some worthless book or paper. Give the country good veins and it wont be long before healthy blood will pulsate through them.

Passiflora Incarnata.—The following is from a paper read before the Ohio Homœopathic Society in May, and printed in the *Southern Journal of Homœopathy*. The appended note is by the editor of that journal:

"*Passiflora* seems to be especially adapted to derangements or disturbed conditions of the nervous system, as neuralgia, tetanus, tetanus neonatorum, chorea, insomnia or sleeplessness. For that nervous, restless, excited or wakeful condition found in so many affections, *Passiflora* has a wonderfully soothing effect, generally producing a quiet, restful sleep, from which the patient awakens refreshed. I have used recently, with gratifying results, the *Passiflora* ⁰ (five drops in the evening, repeated if needed) to produce sleep in a little girl eight years of age, who was suffering from chorea so marked as to greatly disturb her sleep, on account of the nervous excitement and continued motion. It is said to be almost a specific for tetanus in horses. I have used the tincture in from one to ten drop doses, and the lower attenuations. This remedy certainly deserves a proving."

[After reading this article I prescribed *Passiflora*, five-drop doses, in a case of tetanus in a horse, with excellent results in eight hours. Dose was repeated every hour.—Ed.]

Constipation.—Dr. Richard Epp's little work, *Constipation, Hypochondriasis and Hysteria*, although it has been on the market for some years,—the second edition came out in 1874,—is one that is well worth a place in the library. "Every one thinks that he knows what are the effects of purgatives," says Dr. Epps, "when, as a matter of fact, he is only acquainted with the primary one. Everybody would at once answer the question of 'What is the effect of a purgative?' Why, to purge, to open the bowels, to make them act, *of course;* why, whatever other action could it have? Yet everybody would be wrong, or rather would only state half the truth. The secondary action of a purgative is to cause constipation. All purgatives have two actions—first, their primary (or purging) action; in the next place, their secondary (or constipating) action. This secondary action is often called by the name of reaction. Whether, however, we use the one word or the other is of no moment, as they

are convertible terms." For all that, however, "the British public is dearly fond of purgative pills;" one of these gives such easy and prompt relief that another is taken the next day, until finally the foolish man or woman is completely in the toils of the purgative devil whence only homœopathy can rescue them. The book contains reports of many most interesting cases of constipation treated by Dr. Epps, that are instructive and suggestive. It contains 124 pages and sells for 55 cents; postage, 3 cents.

Scolopendra Morsitans.—Dr. Sherman, of California (*Med. Advance*), reports the following symptoms as prominent in a woman bitten by a centipede:

"*Head.*—Vertigo, with blindness, worse in the morning.

"*Stomach.*—Nausea and vomiting; unable to retain either food or liquid.

"*Back.*—Terrible pains in back and loins, spasmodic and irregular, at times extending down the limbs. Pains returned every few days for three weeks, commencing in the head and going out at the toes. 'Resembled labor pains as nearly as anything I ever saw.'"

Baldness.—According to Dr. Saymonne, the wicked "bacillus crinivorax" are responsible for bald-headed men; they eat the hair, "make it brittle," so that it breaks off at the roots, and then the little cuss goes for the root itself and grubs it up. This proceeding shows a lack of reasoning in the crinivorax that is not to its credit, for it could hasten matters by going for the root at once. By the way, who ever saw a case where the hair "broke off at the roots?"

Dr. R. R. Petitt, in *Medical News*, reports a case of death resulting from the exhibition of two doses of *Sulphonal* of 15 grains each, the last administered after a lapse of one hour and a quarter. The patient was a woman aged twenty-eight. The moral is obvious.

Glonoinum.—The regulars have just discovered, it seems, that nitro-glycerine is an excellent remedy. Dr. Burroughs (*Lancet*) has used it with benefit in the following instances:

"A patient with neuralgia of the heart (*angina pectoris*) was frequently relieved of pain and dyspnœa by it."

"A young man who fainted during the dressing of his wound was quickly restored by a drop on his tongue."

"Anæmic headache was quickly relieved by it."

"One drop instantly cured pure spasmodic asthma in a workman, enabling him to resume his work at once."

"A patient with typhoid fever became delirious and extremely prostrated on the twenty-fourth day. His temperature fell, his

pulse became slow and remittent. He refused to take brandy. One-fourth of a drop of nitro-glycerine (1 per cent. solution) was given every fifteen minutes for two hours. The pulse became full and regular, the delirium subsided, and in twenty-four hours the mind was clear."

"In a case of acute alcoholism the patient was made worse by a single drop of nitro-glycerine solution."

"In a case of opium narcosis and of uræmic coma, with feeble pulse, great benefit followed its use."

"In cases of apparent sudden death and drowning, nitro-glycerine dropped on the tongue might start the heart again to beating, and restore the patient to life."

Fluid Extracts.—W. H. Wearn, in *Western Druggist*, comes out strong against fluid extracts; he asserts that they rapidly deteriorate and vary so widely in strength as to be unreliable. He obtained three samples of fluid extract *Digitalis* from the three largest manufacturers in the United States. The best sample was found deficient in the ratio of 135 to 153; the second fell off to 110, and the third to 50. "It is evident," says Mr. Wearn, "that they are deficient in strength, and that they all vary, and that none of them will prepare a tincture equivalent to that made from the drug."

Better stick to homœopathic mother tinctures and not be led away by watery, weak and uncertain fluid extracts. If cheapness is desired, dilute the θ with *aqua destillata* and the result will be a better medicine than the Fl. ex.

Poke Berries a Satisfactory Anti-Fat.—"Several years ago I called attention to the efficacy of pills made from the extract of poke berries as a reliable remedy in obesity. My attention was attracted to it from the fact that birds that feed on the poke berries in the fall are deficient in adipose tissue. It has been my custom for several years to gather in the fall, after frost, a quantity of the berries, express their juice, and evaporate it to the consistency of an extract, of which I make pills of 3 or 4 grains. The dose is two pills before each meal, sometimes increased to three or four. They diminish the appetite to some extent. In some cases the reduction of weight is remarkable, as much as fifteen to twenty pounds per month. Blondes are more especially affected by them; brunettes not so much so. The reduction is frequently apparent the first week; a feeling of lightness and comfort follows their administration. One patient lost forty pounds in three months and suffered no inconvenience; the average is from ten to fifteen pounds per month. I think the berries should be gathered after frost, as the frost seems to destroy the poisonous properties of the berries. I am somewhat

surprised that this treatment has not received the attention it merits. In a large number of cases treated no symptoms of a dangerous character have been reported, and but few failures of a satisfactory result. The remedy seems analagous to Iodide of potash, and acts in chronic rheumatism similarly. I have found it efficacious in that painful form of rheumatism of the arms and shoulder, of which so many complain.

"I have failed to notice many physiological symptoms. Some sleepiness and dulness for a few days, but this passes off soon. It does not constipate the bowels, but rather acts as an aperient. It seems to have the power of causing absorption of adipose tissue in a great degree."—M. M. Griffith, M.D., in *Medical Summary.*

Thuja for Diphtheritic Throat.—"Experiences with Thuja in the treatment of syphilitic fauces have led me to try the remedy in the early stages of diphtheritic throats. Thus far I am more than satisfied with its effects upon nascent states of faucial manifestations. The drug seems to be specific in curable conditions of diphtheria, and the majority are such. But the agent must be employed early —as soon as the chill is off and the pharynx is sore. If the drug be not used until the nares, fauces and larynx are in a state of sloughing, and putrescent fluids are discharged in astounding quantities, nothing beneficial may be expected from it, or from anything else. To render such a throat aseptic would require purification by fire. In the worst forms of putrid diphtheria, we might as well try to render aseptic a public sewer. It would be like the efforts of the old woman who would keep back the sea with a broom."—H., in *Dr Scudder's Journal.*

The Great Work.—The *American Homœopath's* recognition of the merits of Dr. Allen's last work, the *Handbook of Materia Medica*, and acknowledgment of the debt of gratitude the profession is under to him for his years of careful labor, is so just that we reprint it in full:

"There can be no question but that Dr. Allen has placed the homœopathic profession under a lasting debt of gratitude for this most beautiful and perfect of materia medicas. The superlative degree of comparison can alone voice our admiration of the work. It is one of the finest books that has ever reached our review table; and after browsing in its rich leafiness for several months in the hope of saying something markedly different from what has already filled the critics in other journals, we find our praise and recommendation tame and pointless—a more than twice-told tale. We have made use of this volume on an average of half-a-dozen times a day since its receipt, and in no instance have we had cause to re-

gret the time given to looking up mooted points or clearing away our ignorance, and we have arrived at the conclusion that with this *Handbook* at hand, assisted by the *General Symptom Register*, together with the promised *Therapeutic Pocket-book* of Bœnninghausen, it must truly be an intricate and involved case when these volumes, understandingly handled, cannot throw light sufficient to make a prescription. The arrangement of the page in double columns, and set "solid," gives room for very nearly four hundred remedies without crowding or the use of very small type. The type, in fact, is one of the handsome features of the book; for by a judicious use of different fonts of type symptoms are made to stand out with great clearness according to their relative values, so that a mere cursory reading of the heavy-typed symptoms of any remedy will, in a few moments, give the reader the genius of that drug, to be followed up for more minute symptoms at leisure if the leading indications were in the right line. Of its intrinsic worth, what can be said that will add one laurel more to the wreath with which the profession has long since crowned the work of Dr. Allen? No intelligent comparison can be made without the book lying before one. It differs from Hering's *Condensed* in compactness of arrangement and the welcome absence of so many contradictory symptoms. It does not blow hot and cold in the same breath. It has sifted out the trash and the cheat, and presents only symptoms that are reliable. The clinical cases are chosen with extreme caution, lest some of the many hypothetical cases, with which our literature is so grievously burdened, should be embodied. For his courage in resolutely omitting what have seemed favorite symptoms when they were not capable of standing the test, Prof. Allen deserves a vote of thanks. If the materia medica reformers will go about their work in the same spirit, there will be, nay, there can be, no objection raised. It differs from Farrington's *Clinical* in being more full and exact, and not given to the colloquial style. It differs from almost every other text-book on materia medica in that it covers the whole field of proven symptoms of every drug used in homœopathy. No one can go wrong who takes this *Handbook* as his rule and guide in prescribing for his cases. It is worthy of the utmost confidence. We have tested it severely, and so far have found no flaw even in the typography. For its therapeutic indications it will take that place in homœopathy that the *United States Dispensatory* occupies in relation to the old school. The mechanical execution is superb. The paper used, the new type, the compactness of matter without crowding, the binding, all reflect credit upon this publishing house."

Effects of Antifebrine Upon Memory.—In a communication to the *Medical World*, Dr. Joseph Haigh, Granada, Kan., gives it as

his opinion, based on actual experience, that the continued use of *Antifebrine* impairs the memory. He noticed this first on himself, after taking the Antifebrine for four months, and found the opinion confirmed by similar effect produced on a patient, a girl of thirteen years. He stopped the use of Antifebrine in both instances, and changed the anodyne, with the effect of distinctly restoring the former ability of remembering current events. This seems to be a pretty fair proving of the drug, though not intended as such. Why may not *Antifebrine*, homœopathically potentized, be a good remedy for a bad memory or a wandering mind?

Salol.—Dr. Mann, in his paper read before the Ohio Homœopathic Association, claims that *Salol* "quickly removes the offensive odor of the breath attending the indigestion of patients suffering from severe rheumatic pains." Also, "I wish to call attention to the action of *Salol* in *articular rheumatism*, and *especially rheumatic neuralgia*. It is not in chronic but *acute* and *acute aggravations* of *chronic cases*, or *comparatively recent cases* of rheumatic affections, where *Salol* gives the best results. . . . . Dose: Five grains to one-half drachm. I generally give five or ten grains every hour until better, then increase the interval between doses gradually. Small doses of Salol are too *slow* and *uncertain;* better give twenty grains than give one grain. A thorough and lasting effect is attained by continuing the administration of Salol in decreasing doses for several days after all pain has ceased."

Ipecacuanha.—Dr. Carl Semelroth, of Mt. Vernon, N. Y., writes as follows on the subject of *Ipecac.* to the *Medical Summary:*

"No doubt the original term *Ipecacuanha* was derived from the language of the South American Indians, as the plant is a native of Brazil, found in moist, thick and shady woods. The same name has been applied to various emetic roots of the United States, which are often used to dilute or substitute for the original imported *Ipecacuanha*, which has been in use in its native country for more than two hundred years; and in 1672, a celebrated physician, associated with a merchant vessel, imported a large quantity of *Ipecacuanha* into Paris, and there placed it on the market as a wonderful secret remedy, and with so much success in dysentery and other bowel complaints that soon a general attention was attracted to it, and the fortunate physician received from Louis XIV., a large sum of money and many public honors, on condition that he should make it a public remedy, so that all could receive its benefits; and from this time on it has maintained its value in materia medica, and, like *Veratrum viride*, has its friends and foes. . . . .

"As this is an age of adulteration, *Ipecac.* has not been overlooked

by the drug dealers; in fact, some seem to owe it a spite, and mix up a sad, abominable trash, and in reviewing the prospect of this drug from a commercial point of view, we cannot resist the conviction that the supplies are becoming either more unreliable, or that the demand is going ahead of the quantity which is available, growing scarcer every day—and soon a big increase in price, if gobbled up by some of the cursed trust combinations that are the pets of this free government."

The RECORDER has preached many sermons on the text of adulterated and unreliable medicines, and welcomes the foregoing from a "regular" preacher. The fact of the adulteration of *Ipecac.* has long been known to all in the drug trade. It is also equally well known that a perfectly pure tincture of this drug is obtainable if the imported root is used in its manufacture, and not the powdered product of commerce. But, of course, those who do this cannot brag of "cheapness," which at the present day, with many, outranks purity and quality.

The Chinese doctors, according to a floating paragraph, claim far greater success in treating certain diseases than their Christian brothers can show, such, for instance, as bilious attacks, gout, stomach complaints, headaches, etc. They require their patients to fast for two or three days, and that, they claim, does the business. Whether they give a Chinese *Sac lac* for the sake of the mental effect is not stated.

An Important Decision.—The following letter comes to hand as our last form closes:

MOBILE, ALA., December 18, 1889.

EDITOR HOMŒOPATHIC RECORDER:

Dear Sir: It has just been decided by the Supreme Court of this State that any one who has a diploma from a reputable college can practice medicine here without having to apply to an allopathic examining board for a license. All the doctor has to do now is to have his diploma recorded in the office of the judge of probate in the county in which he practices. This only costs one dollar. I hope you will make a note of this in your journal, so our brethren may know that we can invite them here now, and we certainly have a splendid field for homœopathy here.

Very truly yours,

GEO. G. LYON, M.D.

THE

HOMŒOPATHIC RECORDER.

VOL. V. PHILADELPHIA, MARCH, 1890. No. 2.

ON THE EMPIRICAL APPLICATION OF MULLEIN.

[FINDING that *Mullein Oil* has been written of in the RECORDER twelve times in the last four years, it occurs to me that an account of the empirical applications of Mullein as a remedy might be of interest to the very numerous readers of the RECORDER. I purpose to give its history from the tenth century to the eighteenth, as the requisite authorities are at my hands.

The "Historie of Plantes" is not a merely interesting field of literature, it is also an useful, and, as I believe, particularly so to the homœopathic physician. Certainly, it contains much that is based upon the superstition of ignorance, but, as certainly, it contains very much that rests on actual experience. Men had common-sense before they had colleges, and one need not be a scholar to know from experience if Colocynthis cures his colics; so I conclude that any virtue ascribed to a plant which has the testimony of centuries behind it is an indubitable fact attested by common-sense from its experience. Now, in such plants as have had a homœopathic "proving," I find many of the virtues empirically ascribed to them sustained by the *data* of the proving, and it must be admitted that this is the strongest of testimony. I was particularly struck when proving *Lappa major* with certain phenomena—in my big toe joints and elsewhere—that resembled an incomplete explosion of gout; and when I began to read its empirical history, I found that Tournefort advised *Lappa* in gout, and that Sir John Hill declared it *the* "specificum" for that disease.

The empirical virtues recorded in the old "Herballs" will also enable one to make applications of our remedies *from their provings*, which it has not yet occurred to us to make; that is, the empirical

use enables us to combine certain symptoms in the proving so that we discover the "like" of a disease not before by us distinguished.

A still further use, and one that I cannot sufficiently emphasize, is this—the suggestion of remedies worthy of a "proving," with which these old volumes abound. I will mention one instance, namely, the *common honeysuckle.* Make a tincture from the leaves and flowers; the "proving" will add a most valuable addition to our *Materia Medica.* "It is already too large," says a reader. My objecting friend, I don't know who you are, but I'll bet a family syringe that you wear a bigger boot than you do a hat. Of course, you can't help that anatomical misfortune, but if you will only keep your mouth shut strangers, like myself, will not be so apt to find it out.]

VERBASCUM THAPSUS MULLEIN.

The Greeks called it *Phlomos*, and derived the name from *Phlego*, "I burn," because the woolly leaves, cut into strips, were used as wicks in their lamps. The Romans termed it *Candela Regia*, and *Candelaria*, from the fact that the stalk dipped in melted tallow was then used for illuminating. In primitive days these "tallow dips" were probably carried in their torch races. An old English name is *Higtaper* (for *Hightaper*), the stalks soaked in tallow or fat being used at funerals, which, in olden times, were often held at midnight—a weird-like scene!

Our first citation is from the Anglo-Saxon text of the *Herbarium of Apuleius*—a work written not later than 1000 A.D.:

"FELTWORT, OR MULLEIN.

"1. This word, which is named verbascum, and by another name feltwort, is produced in sandy places and on mixens. It is said that Mercurius gave this wort to Ulixes, the chieftain, when he came to Circe, and he after that dreaded none of her evil works.

"2. If one beareth with him one twig of this wort, he will not be terrified with any one, nor will a wild beast hurt him, or any evil coming near.

"3. For gout, take this same wort verbascum pounded, lay it to the sore; within a few hours it will heal the sore so effectively that (*the gouty man*) can even dare and be able to walk. Also our authorities declared and said that this application was in the highest degree beneficial."

Here we have a pronounced example of the superstition and the experience before mentioned.

The classical student will at once recall that passage in the tenth book of the *Odyssey*—"Therewith the slayer of Argos gave me the plant that he had plucked from the ground, and he showed me the growth thereof. It was black at the root, but the flower was like

milk. Moly, the gods call it, but it is hard for mortal men to dig; howbeit with the gods all things are possible."

We are helped to a conception of the antiquity of the Homeric poems when we recollect that the identification of this celebrated plant was not possible, even in Pliny's time. Since then much learning has been exercised on this *quæstio vexata*. Fée came to the conclusion that the *Moly* of Homer, Theophrastus, Ovid, and the poets in general, is only an imaginary plant, while Sprengel derives the name *Moly* from the Arabic, and says the plant is the *Allium nigrum* of Linnæus. That it is not the Mullein, is quite evident from Homer's description. Judging from the milk-white flower and the black root, I will hazard the conjecture that *Comfrey*—the *Symphytum magnum* of the Romans—is meant.

One feels some surprise at finding it recommended for gout with the indorsement of "our authorities," to wit, the Druids. The Herbarium of Apuleius was taken to Great Britain by the Romans, but this reference to *our* authorities shows that the Anglo-Saxon copy had gone through Druidical, or bardic hands. Did Gurth, born thrall to Cedric the Saxon, have gout and lay this same wort, pounded, to the sore, that he "could even dare and be able" to hobble after his master's swine as they fed on acorns? Alas! it is more than likely, for there is a gout from pinched want as well as from pampered surfeit. The gout that Apuleius met, came from stewed lampreys and Salernian wine, but whence this of "our authorities?" In the medical treatise of Rhiwallon and his sons —*Meddygon Myddfai*—that dates back to the thirteenth century, I find ten remedies for gout, and three of them are distinctly specified as for "gout in the stomach." No better proof can be required that gout is not solely a product of luxury. How far would the excessive beer-drinking of the Anglo-Saxons account for it?

We jump over six centuries to meet our next authority, Rembert Dodoens, whose work first appeared in English in 1578. The quaint spelling of the original is given:

"The roote of white Mulleyne boyled in redde win, and dronken, stoppeth and healeth the dangerous laske, and bloudy flixe. [Laske is diarrhœa.]

"The same boyled in water and dronken is good for them that :e broken [ruptured] and hurte inwardely, and against an old ough of long continuance.

"The decoction of the roote swageth toothache, and is good against e inflammations and ulcers of the Aulmondes, or kernels of the .rote, to be kept warme in the mouth, and the mouth to be washed nd clensed, by often gargeling of the same.

"The leaves of Mulleyne are also good against the Hemorrhoides,

when they be wiped and clensed therewith, and it is good to washe the mouth with the decoctions of the same.

"The seede of Mulleyne is good to drinke (as saith Plinie) against the bursting and falling out of joynte of members, for it taketh away the swelling and swageth the payne."

The ever-worthy and learned John Gerarde published his voluminous "Herball" in London, *anno* 1597, and before a second edition was called for, he grew aweary, and laid him down, and went a-simpling no more. In 1633, one that was Thomas Johnson, "Citizen and Apothecarye of London," was moved in the spirit to edit and reissue Gerarde's *opus*. Honest Thomas Johnson! many a man would have stolen the volume bodily, added his modicum and published the enlarged work as his own; but, "Apothecarye" as thou wert, thou hadst in thee the soul of a Cavalier, and thou didst cast thy fortune with Charles the First, of England, and seal thy fealty with thy blood at the last siege of Basing House, when Cromwell's Invincibles carried it by storm. Inigo Jones, the architect, and Wenecslaus Hollar, the engraver, escaped, but thou wert dooned—no more simplings in field, and forest, and breezy glade for thee, forever.

Johnson's edition of Gerarde's "Herball" is noteworthy as giving the earliest mention of MULLEIN OIL:

"The later Physitions commend the yellow flowers, being steeped in oile and set in warme dunge vntill they be washed into the oile and consumed away, to be a remedie against the piles."

Johnson gives the following new applications: "The leaves of Mullein boiled in water and laid vpon hard swellings and inflammations of the eies, cure and ease the paine.

"The leaves worne vnder the feet day and night in manner of a shoo sole or sock, bring downe in yovng maidens their desired sickness, being so kept vnder their feet that they do not fall away.

"The country people, especially the husbandmen in Kent, do give their cattel the leaves to drink against the cough of the lungs, being an excellent approved medicine for the same, whereupon they call it Bullocks Lungwort."

In the same year as the above work was issued a second edition of Dr. William Langham's "Garden of Health." Though a physician, Langham was a rank empiric—a combination that is also to be observed now-a-days. He gives us these observations: "Warts, stampe the flowers betweene stones, and apply them, or apply the distilled water of them. Eyes red and dropping, wash with the juyce of Mullin. Matrix windy, [Physometra] apply the juyce of Mullin and Rapes with Barley meale. Cankers, burn it and apply the powder. Scab and itch, distill the flowers and leaves in a Limbecke, and use the water with cloutes. Bleeding in any place,

stampe it and apply it to the branches of the teates. Tenesmus, seeth it and stampe it, and apply it to the fundament, or sit over the fume of it. Feuer tertian, put the juyce of it into the nostrels before the fit. Feuer quartan, drink the juyce before the fit."

The next is a gem: "Flowers stopt, binde it to the soles of the feet; flowers to stop, binde it to the arme pits."

John Parkinson, Herbarist to King James the First, issued his "Theatre of Plantes" in 1640, and had notes from Lobel and Dr. Bonham. He evidently strove to give the actual rather than the mythical "vertues," and one reads him with a growing conviction that his empirical *data* are sustained by experience. He says "the decoction of the root is profitable for those that have crampes and convulsions. That the fumes of the burnt seeds and flowers helps those who have piles, or falling downe of the fundament. The decoction of the root in red wine, or, if there be an ague, in water wherein red hot steels hath been often quenched, doth stay the bloody flixe. The decoction of the root in red wine openeth the obstructions of the bladder and reines when one cannot make water. The juyce of the leaves and flowers being laid upon rough warts, as also the powder of the dryed rootes rubbed on, doth easily take them away, although it will do no good to those [warts] that are smooth. The powder of the dryed flowers is an especiall remedy for those that are troubled with belly aches, or the paines and torments of the collick. The distilled water of the flowers is used against running or creeping sores, or any other deformity of the skin. An oyle made by the often infusion of the flowers, is of very good effect for the piles."

From Robert Lovell's *Pambotanologia*, Oxford, 1665, I cull two observations that I have not met elsewhere: "The ointment of *Mullein* healeth the simple gonorrhœa, used upon the loins and testicles.

"The *Tapismel* (Honey of Mullein) often used for epilepsie, taken in the morning fasting, and in an evening about 4 of the clock in the afternoon" (*sic*).

The English Herbal, or History of Plants, by William Salmon, M.D., London, 1710, is the last of its kind of any note. It is quite comprehensive, for he had carefully read all his predecessors, and had travelled extensively, especially in America, and it is a model for its method: evidently, a labor of love by one ripely qualified. His huge folio is a fit ending for a long line of worthy Herbarists. It is a simple tribute to his well-doing to quote in full what he says of

The Virtues.

"XII. The Juice or Essence.—Taken from a Spoonful to three Spoonfuls in a strong Bodied or Styptick red Wine, it cures Diarrhea's, Dysenteria's, Lienteria's, and the Hepatick Flux; and is good

against a Rupture or Bursteness; they cure Catarrhs and Defluxions of Rheum upon the Lungs; and used as a Gargle, heal a sore Mouth and Throat. And being drunk Morning and Night for 30 days together, it cures the Gout. *The Juice or Essence of the Roots*, made before it bears a Stalk, and taken in a draught of *Muskadine*, for three or four times or oftener, an hour before the coming of the Fit of a Quartan Ague, will certainly cure it. *The Juice of the Leaves and Flowers* being put upon rough warts, and rubbed on, quickly takes them away, as *Matthiolus* says, but do no good to those which are smooth.

"XIII. *The Decoction in Wine or Water.*—It is profitable for those which are Bursten, and for such as have Cramps and Convulsions, and likewise for such as are troubled with an old Cough. Being used as a Gargle, it eases the Tooth-ach. *The Decoction of the Root* in Red Wine or Water, is good against an Ague, as also the Bloody Flux, more especially, if Gads of red hot Steel or Iron has been often quenched therein. The same opens obstructions of the Reins and Bladder, and is good against the Strangury. It is of great force to dissolve tumors or Swellings, and Inflammations of the Throat. *The Decoction of the Herb in Water*, Country People give to their Cattel, when troubled with a Cough, or by reason of a Looseness of the Bowels have a falling out of the Intestinum rectum or Fundament.

"XIV. *The Compound Decoction.—Take Leaves of* Mullein *two parts*, Camomil Flowers, Marjoram, Sage, *of each one part, make of all these a Decoction in Wine.* With these bathe Morning and Night where the Veins are Swoln, or the Nerves are contracted, or where the Cramp commonly afflicts; it gives relief, ease and comfort.

"XV. *The Powder of the Roots.*—Given to a Dram in a strong or Stiptick red Wine, Morning and Night, it stops all sorts of Fluxes of the Belly. If it is rubbed often on rough warts it will take them away in a short time.

"XVI. *The Powder of the Flowers.*—It is an especial remedy for such as are afflicted with Belly-aches, and such as are troubled with the Colick, tho' periodical. It may be given from a Dram to a Dram and a half, Morning and Night, in any proper Vehicle.

"XVII. *The Fume.—Take Seeds and Flowers dryed of* Mullein, *of each three parts*, White Rosin *two parts*, Camomil Flowers, *and* Caraway Seeds *of each one part, mix them, and put them upon live Coals in a Chafing Dish, or some Earthen Pan*, and set it in a Close-Stool, and let the person who is troubled with the Hemorrhoids or Piles, or falling down of the Fundament, sit over it to receive the Fumes up the Body; it gives much ease and relief; and is also very profitable for such as are troubled with a *Tenesmus*, which is a desire to go often to Stool, and can do nothing.

"XVIII. *Tapismel, Honey of* Mullein.—*Take Juice of* Male Mullein, *Juice of* Celandine, *of each one part; Clarified* Honey *two parts; boil them by degrees, till the Juices are consumed.* The simple *Tapismel* being taken three times a day, an Ounce or an Ounce and a half at a time, stops Catarrhs powerfully, and is good against the Falling-Sickness.

"XIX. *Tapisvalentia*, an Ointment containing the Powers, Force, or Strength of Mullein.—*Take Juice of* Mullein, Hog's Lard, *of each equal quantities; mix and beat or grind them together in a Stone Mortar; keep it in a convenient Vessel nine or ten days, then heat it well twice, once more with fresh Juice, until it be green, and another time without Juice first casting away what is thin and discolored, then keep it close covered for use.* It softens hard Tumors, and eases their pain; anointed on the Belly, it stops a Looseness and a Bloody Flux; so also given in a Clyster. Anointed on the Crown of the Head and Sutures, as also on the Nape of the Neck and Stomack, it stops Catarrhs, and is an excellent thing against Coughs of the Lungs, and it is found by experience to cure the Hemorrhoids or Piles.

"XX. *The Isolated or Decocted Oil.—It is made by an Infusion or Decoction of the Flowers in pure* Olive Oil, *often repeated.* It is very powerful against Hemorrhoides or Piles.

"XXI. *The Ointment.—It is made of the bruised Flowers, the Yolk of an Egg, Juice of Leeks, and Crumbs of White Bread beaten together in the form of an Ointment.* Applyed to the Piles when they swell, and their pains are most vehement, it gives wonderful ease upon the spot, and in a short time cures them.

"XXII. *The Cataplasm.*—1. *Made of the Leaves and Seed boiled in Wine*, and laid upon any Dislocation after it is set, eases all the Pains and discusses the Swelling. 2. *Made of the Leaves and Tops of the* Lesser white Mullein *boiled in Water*, and applied to the Gout, it gives wonderful ease, and discusses the Tumor. 3. *Made of the green Leaves beaten in a Mortar* and applyed or bound to a Horse Foot which is very much pricked with a Nail, or Thorn, or Splinter, it eases the Pain, and heals it in a short time.

"XXIII. *The Distilled Water of the Flowers.*—Take to 3 Ounces at a time or more, Morning and Night for some days together; it is said that there is not a better remedy found out for the hot Gout. Dropped into the Eyes, it takes away the watering of them, and also cures the redness of the face called in *Latin*, *Gutta Rosacea*, or the Rose, if it be washed often therewith. This water is also used against creeping or running Sores or Ulcers, or any other deformity of the skin.

"XXIV. *The Spirituous Tincture.*—It cures a vehement pain of Stomack, and is profitable against Convulsions, Fainting and Swooning fits, Palpitation of the Heart, Sickness at Heart, and Vomiting, a vehement Diarrhœa, and the Bloody Flux. Dose from 1 Dram to 3 in a glass of *Madera*, Sherry, or Canary.

"XXV. *The Oily Tincture.*—Outwardly applied to the Piles, it eases the pain, heals and cures them. Applyed to the Gout, it eases the pain and cures it: Anointed on the Back Bone and other parts affected, it prevails against the Palsie, Numbness of the Limbs, and a Trembling. Inwardly taken from a Scruple, Dram, Dram and a half or more, it gives ease in the most Vehement Colick, prevails against inward Convulsions of the Bowels, induces the Terms in Women if stopt, facilitates the Birth, gives ease in the Strangury, and provokes Urine powerfully, expelling all Heterogeneous things, as Stone, Gravel, Sand, or Tartarous Mucilage from the Reins, Ureters and Bladder."

I can but think that Hahnemann's introductory observations to his pathogenesis of *Verbascum* are aimed directly at the empirical history of this drug. His proving is of meagre symptomatology, and his language seems to contrast the paucity of his results with the plenitude of the empirical data. As the homœopathic school now-a-days sees so little of Hahnemann's writings in its journals it may be a novelty to quote a little of him now and then, lest he be wholly forgotten:

"Who would believe that the medical school, as it has hitherto existed, in place of earnestly endeavoring to ascertain *experimentally* what genuine, dynamic powers this plant manifests on the health of human beings, was content to ascribe to it *conjecturally* (falsely) a demulcent, resolvent and laxative medicinal power, from the sickly odor of its flowers when crushed with the fingers, and from the slimy character of its juice, and to employ it blindly, in combination with other herbs whose medicinal qualities were equally unknown, for such conjectural objects, in the form of gargles, poultices, and clysters?

"The following pure symptoms and morbid states which have been produced by this plant on healthy persons will show how much mistaken the medical world was in its frivolous conjecture, and, on the other hand, for what true curative objects it may be employed with sure effect in natural morbid states corresponding in similarity to the characteristic symptoms produced by it.

"A small portion of a drop of the above juice is a sufficient dose for homœopathic purposes."

What a magisterial manner—even dogmatic! It is evident to any fair-minded reader that Hahnemann's condemnation of the empirical history of Verbascum is unjust, unphilosophical, and, worse than all, untrue; and this because the ascription of "demulcent, resolvent and laxative medicinal power" not only does not include all that the said history teaches, but puts into it a quality—"laxative"—that is not once mentioned in more than a thousand years of empirical testimony. Hahnemann was quick enough to avail himself of evidence derived *ab usu in morbis* to back up pathogenetic

symptoms; but why not use the evidence *from the use in disease* to convict a pathogenesis of *incompleteness?* This can be done, and if we seek the truth must be done, in the case of *Verbascum.*

If efficient provings corroborate no features whatever of the empirical history of a drug we are bound to reject such history as false; but, on the other hand, if provings do corroborate *any* feature of the empirical history it establishes the probability of all its features and suggests that the provings are incomplete. Now the empirical history says that Mullein "provokes urine powerfully," and the proving of Hahnemann—"Frequent call to urinate; the urine passed in greater quantity"—and that of Gross—"He must urinate very often and very copiously"—corroborate this feature. It is, then, a fair inference that our provings are incomplete, and, presumably, from the dosage employed.

Hahnemann's mother tincture is "the freshly expressed juice of the *Verbascum thapsus* at the commencement of the flowering mixed with equal parts of alcohol," and Hahnemann in 1826 did not use ounces of a mother tincture in a proving: hence the inference that the paucity of his pathogenesis of *Verbascum* is due to incomplete proving. It is, then, my conviction that "for what true curative objects it may be employed" is by no means indicated in the meagre Hahnemannian provings.

That MULLEIN OIL, in the lack of comprehensive provings, should be tried empirically in piles, is a duty, in the face of three centuries of empirical testimony to its efficiency. A symptom from Langhammer's proving may enable us to apply to the "exact morbid state corresponding in similarity to the characteristic symptoms produced by it," "*Scanty evacuations of fæces in small, hard bits, like sheep's dung, with pressing.*"

One must use physiology in order to divine the pathological condition when one or more symptoms of a disease are known. Now if the stool is scanty and in small, hard (and therefore *dry*) bits like sheep's dung, there is a deficiency of water in the intestines and an excess of it eliminated by the kidneys. Then the Verbascum hæmorrhoidal patient will probably have: INFLAMED AND VERY PAINFUL PILES; SCANTY EVACUATION OF FÆCES IN SMALL, HARD BITS, LIKE SHEEP'S DUNG, WITH PRESSING; FREQUENT, OR COPIOUS URINATION.

If there is also *a pain in the belly that extends deep down, causing a contraction of the sphincter ani, and a transient call to stool,*" then it is even a mathematical certainty that *Verbascum thapsus* is the remedy under a law as unerring as that of gravitation.

My dear reader, it is easy for you to try the remedy under the conditions given; do so, and when the law fails, write and put me to shame.

S. A. JONES.

ANN ARBOR, February 1st, 1890.

HOW DO MEDICINES ACT?

PART IV.

BY RUFUS CHOATE, M.D., ROCKVILLE, MD.

(Parts I., II., III. are in No. 2, Vol. III. of the RECORDER.)

MEDICINES act by and through their form.

Everything exists in, and impresses itself in its individuality through its form.

The form of a thing constitutes the entity of that thing.

A substance is sweet because its globules are round. The rounder the globules the sweeter the substance.

A substance is acid because its globules are angular. The more angular the globules the more acid the substance.

A substance in its general conformation, with all its complementary parts, contains the form that characterizes its smallest particular.

A condition that does not exist in the particular cannot exist in the general.

Every inherent particular of any part of the general conformation must be in existence in every one of the particulars of the whole.

An external contact cannot localize itself upon a special portion of the body without affecting the minutest particular of the whole body.

There cannot be such a state as a local disease.

There is a local manifestation of a general disease condition, and a corresponding conformation of this local manifestation is made upon every atom of the entire organism.

Potentiation does not destroy the form of the substance. It removes external enveloping forms.

External enveloping forms have resident within them the germinal form, which gives individuality to the general form, and each enveloping form admits the germinal form to lower planes.

A germinal form, to become a remedy for the cure of disease, must have taken from it the enveloping form, either by potentiation, digestion in the stomach, lustration in the liver, or secretion in the glands.

Potentiation resolves a substance to its germinal form, and prepares it for immediate reception as a remedy in the system.

The old-school method of administering drugs makes digestion of a substance a necessity before it can become a remedy for the cure of disease.

A substance in its external enveloping forms has influences over

the system, but these influences enter the system by a mediate way; potentiation admits the entrance of the same substance, without its externals, immediately.

All remedies enter the system through veins, and while in the veins are functional remedies.

All remedies are distributed to their appropriate place in the body through arteries, and are then nutritive remedies.

If there is not a demand in some part of the body for the substance introduced through the veins, it remains functional, though it gains an entrance into the arteries.

After a time its presence possibly creates a demand, and it is thereby admitted as a nutritive. It may cease to be a nutritive, and become a functional.

The remedy applied to the tongue, or the skin, gives cognizance of its presence to the nerves through its form, which is the only quality of the remedy the nerves can comprehend.

By its form the remedy is transmitted through the veins, accompanied by a guide, the nerve, to its appropriate place at the cortical cells of the brain.

The brain, or rather the mind, which is within the brain, aware of the need in some portion of the body of a particular form, inspects that supplied through the veins, and finding it suitable, gives it over to the arteries to be transmitted to its destination.

The constituents of the body should be named form 1, 2 or 3, etc. The substance, whose form will supply the deficiency in form 1, will prove to be identical with form 1, and will be known as form 1.

The spectroscope, perhaps, will assist in distinguishing remedies by their forms. As Chloride of sodium has a fixed spectral line, so its deficiency in the body will show a change in the Chloride of sodium line, to which change, duly recognized, may be attached some of the provings of Natrum mur. Every disease condition must change every atom of blood to accord with that condition. We know that atoms of blood do not remain longer at a point where there is inflammation than is necessary for their transmission. While in transit they lose their spherical form and become square or angular to accord with the disease condition at that point. Suppose, for illustration, that the atom of blood passing an inflamed tissue takes the form of a crystal of Chloride of sodium. It follows under our law of similars, that Natrum mur. is the appropriate remedy.

A remedy whose form accords exactly with the form of the disease condition is a similimum, and acts immediately for the cure of the disease. If it accords with the form of some other portion of the system than the disease portion, and acting upon its accordant can, by changing it, effect a change in the disease portion, it is a similar,

and acts immediately. If it is wholly dissimilar, it is an opposite, and produces a disease condition opposed to the existing disease, and is an opponent.

Let No. 1 represent the disease form, and also represent the form of Natrum mur. Then when Natrum mur. is administered it acts immediately for the cure of the disease, and is the similimum. Let No. 2 represent Apis. If form 2 is administered, instead of the more appropriate form 1 and makes a change in form 2 of the blood globule which will act with ability to make a further change in form 1, and restore health, it is the similar, and acts mediately. Let No. 3 represent Mercurius which we suppose is wholly dissimilar to the disease form 1. Form 3, or Mercurius, acts here antagonistically and produces a disease form 3, which, for a time, overshadows form 1.

To increase our new nomenclature let a perfect globule be represented by A; less perfect by B, and so on through the alphabet. In time algebraic signs can be made to state a condition and greatly assist in the solution of difficult problems.

B = 1. Condition or shape of globule B, returned or restored to condition A through the use of its similimum form 1.

B = 3^{5c} 2^{10x}. Condition B cured by the successive use of form 3, 5^{th} centesimal and form 2, 10^{th} decimal. C > 7^{5x} = 8^{10c}. C made better by form 7, 5^{th} dec. and cured by 8, 10^{th} cent. E > 9^{100x} > 8^{10c} ∨ D 10^{200} < M 3^{x} = 5^{500}. Condition E made better by form 9^{100th} dec., at a stand-still through the use of form 8, 10^{th} cent., improved to condition of D by form 10^{200th}, made worse by 3 mother tincture, and cured by 5^{500th}.

Nor will these forms be so very difficult to decipher. Take for illustration, Natrum mur. The form of the crystal of chloride of sodium is known. According to the proposition made above, that a general must be of the form of its particulars, it follows that an imponderable quantity of Natrum mur. must have the same form as the greater bulk of chloride of sodium. It is known, and established forever, that chloride of sodium produces certain thoroughly recognized effects in the body. Symptoms of disease exactly similar to these provings of the drug are invariably cured by the administration of that drug. It then follows that all indications of disease immediately cured by Natrum mur. must have the form of a crystal of chloride of sodium.

Natr. Mur.—Headache, beginning with a blinding of the eyes. "Blinding headache;" "sick headache."—MORGAN.

HOMŒOPATHY IN ENGLAND.

MANY times have we heard apologies offered for the apparent failure in the growth of homœopathy in England.

In our opinion, the time for apologies has long since passed. The homœopathic physicians there are those for whom we need not blush, and when all is understood, we think it will be granted that they are doing a good work. The query is rather, "How have they been able to accomplish so much? rather than "Why have they not done more?" It is almost impossible for a stranger to understand the disadvantages under which our trans-Atlantic brethren labor. With our American spirit of "free thought and free speech," we can scarcely imagine in any country other than despotic Russia or benighted China that such laws could be enforced as to effectually control all branches of medicine and give to one school a monopoly in physic. With an assumption of knowledge that would be simply an amusing specimen of egotism, were it not clothed with the purple robes of royalty and the ermine of the law, the allopaths assume to dictate to every man, not only of what his medical education shall consist, but also where he shall acquire it.

Not only must he study medicine at a college where the name of Hahnemann is never heard, except it be with imprecations, but he must exhibit a diploma of variable importance granted by some one of the nine or ten authorized bodies having their seat of power in some part of their "tight little island," less than half the size of one of our States.

Free trade is believed in by Great Britain in everything excepting medicine. In this the "tariff" is very high.

Let us count the cost for one to become a physician in England provided he has been so fortunate as to hear of and believe in the truth of homœopathy.

He wishes to study "scientific homœopathic medicine"—a system embracing all that is known in this last quarter of the nineteenth century and proven to be of value for the "speedy, gentle and permanent restitution of health."

What must he do?

He must first pay for the privilege of grinding out four long years in an allopathic college where, if he dare make known his conviction, he will be privately reproved and publicly shunned, and thus after this long struggle, and when his classmates are ready to commence work, he must sail to America and begin the study of true medicine. After a thorough course here, he may succeed in forgetting enough of the old and gaining enough of the new to make a good physician. But how many would want to spend six or seven years in the best part of one's life and a liberal amount of money in gaining what

might be secured in one-half the time? And how many of us commenced the study of medicine with strong enough convictions so that, had powerful influences been brought to bear, we would not have been changed in our beliefs and lost the faith that was in us? Would we send a son to a Presbyterian school of theology, expecting him to become a Methodist when he graduated?

No one can estimate the number of adherents every year lost to our school from the influences of enforced surroundings. To each one who follows the course of study outlined above to its successful termination, it is safe to estimate that a dozen become dazzled with the glitter of "state medicine," and after declaring their intention of "looking into homœopathy some day," settle down into the easy ruts of allopathic medicine. But, notwithstanding the gigantic barriers there are an increasing number of men with the courage of their own convictions who are doing valiant work for homœopathy.

In Glasgow such an one is Dr. James E. Hardy whom every American is glad to meet, whose extensive practice is only equalled by his bountiful table, and his belief in "*similia*" by his hospitalities to strangers. Judging from the elegant residence in which we found him, and the sample of his fare we were shown, we would solemnly affirm that homœopathy was not being *starved out* in Glasgow. In this city where there is such a plethora of allopaths, that calls are being made and medicine furnished for *nine-pence a visit*, Dr. Hardy is getting £1, and refuses calls daily.

In Edinburgh, while of course everything seemingly is in the hands of the allopaths, yet there are men of our school who are busy night and day, not only in practice, but doing good missionary work in the cause of homœopathy. Dr. W. T. P. Woolston is one of these, who, besides attending to one of the largest practices in Scotland and editing the *Gospel Messenger*, has also under his care three young men whom he is instructing faithfully in the law of homœopathy while they are attending a college whose professors declare that, although there is a law governing every other science, medicine alone is merely a matter of experiment. Under Dr. Woolston's able teachings, there is little fear but that they will become well-grounded in the truth. Had our school "a fair field and no favors," there could not be a more promising location found, or a more lovely city in which to live than Edinburgh.

Concerning London, the story has already been often told. The same difficulties are in the path of every student. Lord Littlewits has not decided that homœopathy is "quite the thing, you know," and no true worshipper at the shrine of royalty would dare do anything so out of the "awdinary" as to publicly say that they had tried homœopathy and found it was a good thing. Until the *people* commence to do their own thinking, and cease to follow the example

of those degenerate scions of nobility (?) with whom such an intellectual process as thinking would be a psychological impossibility, homœopathy cannot grow rapidly.

The London Homœopathic Hospital, Great Ormond Street, W. C., is doing good work, and was well filled with patients when visited. A large amount of dispensary work is done by the staff composed of well-informed and thoroughly live men. Mr. Knox-Shaw has charge of the Ophthalmic Department, and has a proud record in surgery. Drs. Cooper, Moir and Carfrae, with seven associates, make up the medical staff and are prepared to treat any case medical or surgical, that may be presented. Dr. Cooper, whom we had wished to see operate, was absent on his summer vacation. Dr. Skinner was also trying to escape from the city, but had time enough for a few words.

His view of homœopathy in England was rather gloomy. With their present unjust laws he saw "no way for our school to more than hold its own.

"On the contrary, could the laws be such as you have in America, our cities would soon be filled with young homœopaths."

Dr. Dyce Brown manages the *Homœopathic Review*, and a thriving practice, and of course has done, and is still doing, good work in our cause.

Dr. Dudgeon, "just around the corner," is doing more literary than professional work at present, but still has not laid off the harness.

Dr. Hughes, out at Brighton, is never idle.

In an atmosphere so saturated with the fumes of allopathy, one would suppose that there would be little demand for homœopathic literature. But this is not true. The people are glad to know of this the same as of any other scientific truth, and would be just as glad to carry the investigation farther, and test the efficacy of scientific medicine at the bedside, had they the chance.

In conclusion, we would state that homœopathy in England has done *well*, considering the difficulties under which it has labored. That these difficulties are *real*, and are the same ones we would find in the United States, were the allopaths given a single State examining board; that the demand for homœopathic physicians in all the large cities of Britain far exceeds the supply; that, had England our present favorable laws, according to every person equal rights to follow the dictates of his own conscience, an increase would be made in the ranks of homœopathy during the next ten years that would equal any decade in our own history.

And that, until such laws shall be enacted, the progress must be necessarily very slow.

E. ELMER KEELER.

639 S. Salina Street, Syracuse, N. Y.

DR. WILLMAR SCHWABE'S MUNIFICENT GIFT TO THE CITY OF LEIPZIG.

THE City of Leipzig too, had, for many years a sick-relief association comprising over 40,000 members. It is under the control of the municipal government and every member is entitled to treatment by the physician of the association, and to receive his medicine at certain drug stores at a reduced price, provided he regularly paid a very small weekly or monthly dues to the association. From sixteen to seventeen physicians are regularly employed and about twelve drug stores are designated at which members may procure their medicines.

For many years Dr. Willmar Schwabe, the proprietor of the largest homœopathic pharmacy, not only in Germany but in all Europe, was chairman and president of this association. An honorable and laborious post without emoluments.

The association possesses a large hospital for the accommodation of its members and one of the great drawbacks, since many years, was, that the limited facilities necessitated the sending adrift of the convalescents as soon as they could be removed without danger, to make room for new-comers.

Hundreds who were as yet too feeble to work were thus of necessity thrown back on the limited resources and the often unwholesome quarters of their families, and for weeks and months incapacitated for active work.

To remedy this crying evil, Dr. Schwabe cast about for adequate facilities and in the goodness of his heart resolved to provide himself the necessary accommodation. An advertisement in the daily papers for landed estates suitably situated for the purpose brought forth no less than forty-nine responses, and for over two weeks the doctor, in company with a friend visited estate after estate, until finally two old feudal castles were selected which combined all the necessary facilities such as shelter from the cold northeast winds, high elevation (1000 metres above tide-water), facilities for thorough drainage, fine old woods and open fields in the immediate vicinity and good spring water in abundance conjoined to an extensive view over hill and dale. The drainage of one castle was almost perfect and needed only some slight alterations to be available, while the internal arrangements of the other were so ill-suited that the whole interior had to be torn out and reconstructed on the most approved principles.

The estate "Gleesberg" near Schneeberg with over 100 acres of land, one-half of it woods, was set apart for female convalescents, while the estate "Frostel," near Schwarzenberg, with 110 acres, one-third woods, was destined for male convalescents.

Both establishments were really sumptuously furnished, provided with adequate bathing facilities, an ample supply of water; paths through the woods with plenty of comfortable resting places were constructed, and on the 25th of last August that for female convalescents was opened and on October 15th that for males was turned over to the association. The direction of both establishments was entrusted to the "Albertinerinnen" (Protestant sisters of mercy), and food for the inmates is furnished by the tenants of the estates. The association allows one mark (25 cents) per day for board at the convalescent's retreat and whenever the cost for their comfortable maintenance exceeds this stipulated sum Dr. Schwabe volunteered to cover the deficiency.

One public-spirited citizen of Reudnitz (near Leipzig), Mr. Hugo Schneider, furnished forty-seven lamps to light the establishments. Dr. Schwabe, a very picture of health, is now in his fiftieth year, in the full vigor of manhood.

The city of Leipzig honored itself by electing him a member of its municipal council. A. J. T.

BOOK CHAT.

Materia Medica.

There is no more difficult branch for the student and beginner in homœopathy to encounter than that of our materia medica. All seems so confused and endless. It is a great mistake to try and master bulky volumes of symptomatology—these are excellent and indispensable for reference, but out of place as text-books for the student. The best book with which to begin an intelligent study of this branch is undoubtedly Dunham's *Lectures*. His preliminary observations and introduction to the study are certainly the best things that have been said, and throw a wonderful light on the symptomatology of the separate remedies. Take for instance that brilliant lecture on Silicea; with what a touch of genius is here developed a rationale of action, and how logical are its therapeutic applications! Now supplement this work by a reading of Farrington's *Clinical Materia Medica*, and you will get a clear and comprehensive idea of the sphere of action of each drug—its character and individuality, that will forever be stamped in your memory. While you will not know all the symptoms of a given drug, your knowledge of its genius will tell you almost intuitively whether a certain condition is in harmony with it or not. This rare knowledge which the masters of our art had in an eminent degree, can only be

obtained by such analytical study as found in those volumes, based as it is, on bedside experience and observation.

For the office table, as a book of constant reference at once complete and up to the times, Allen's *Handbook* is indispensable. This great work so recently published, is doing more for accurate prescribing than any other work. Like a dictionary it must be within your reach and be consulted whenever necessary, which is almost with every prescription made. Its usefulness will be greatly enhanced when the new Bœnnighausen *Repertory* arranged by Allen is published, which we are informed, will be in a few months. A smaller work for reference, thoroughly reliable, simply because its author is Constantine Hering, is his *Condensed Materia Medica*. Its excellent arrangement, giving each symptom or new line, is very grateful to the eye and greatly facilitates quick choice between concordant remedies.

Now there is another class of books dealing wholly with the absolutely essential symptoms, the key-notes or characteristics, which ought to be committed to memory and thus made one's own. A very good presentation of these is found in Cleveland's *Salient Materia Medica and Therapeutics*, and also most excellently presented at the head of each drug in H. C. Allen's *Therapeutics of Intermittent Fever*. This is a queer place, perhaps, to look for general "key-notes," but it is a most valuable mine of them. We know of one professor of materia medica who always recommended this special work as his text-book for his classes. There is a vast amount of the best and most practical therapeutical application of our symptomatology scattered throughout that classic work Gurnsey's *Obstetrics*. It contains not only the best homœopathic treatment on diseases of women and children yet published in our school, but contains also brilliant interpretations and concise, clear indications for remedies crystallized in simplest phraseology for everyday needs. Equally brilliant and fascinating in their boldness, though rather more imaginative are the deductions of Teste, our French student of materia medica. If you can pick up a copy of his work, now out of print, do so; you will find it enjoyable reading. Some of his peculiar therapeutic applications can be found in his small treatise on diseases of children. Though peculiar, they have all been clinically verified.

For a full presentation of the vast resources of our materia medica, arranged under the different pathological conditions, Lilienthal's *Therapeutics* fills a unique place. It is comprehensive, reliable, and represents the bedside experience of the homœopathic school up to date. While the venerable author in this book includes all that is valuable and trustworthy, and thus gives it permanency in our literature, his own fifty years of active general practice with its

ripened fruits of experience give this book a practical value far above all mere compilation, however judiciously done. Then there are several works on this branch that pursue interesting side paths. Foremost among these is Schüssler's *Biochemical Remedies or Tissue Builders.* However insecure his theory may be, the *Twelve Tissue Remedies* will repay study, and Schüssler has given us a few most valuable remedies that future proving according to homœopathic method will establish as polychrests of the highest order.

Hale's *New Remedies*, especially the therapeutics, forms a most readable volume and is full of practical suggestions: Then there are valuable separate studies published, like Burnett's *Essay on Gold*, and on salt, and Reill on Aconite, etc., which will repay perusal. Do not neglect to read Hahnemann's introduction to different remedies in his *Materia Medica Pura;* it is good to come into direct contact with that great mind in his work-shop and see how, under his magic touch, the apparent hopeless confusion of amassed symptomatology becomes organized into living interpretation and useful form.

In connection with the materia medica, a book on the philosophy of homœopathy ought always to be read, and no student ought to fail to read and re-read Hahnemann's *Organon.* It is not light reading, though, so take it slowly, and intersperse it with his most genial interpreter, Carroll Dunham. Get the latter's *Science of Homœopathy* and whatever else he has written. It is all solid gold.

Then Jones's—the brilliant Sam Jones—little book on the *Grounds of a Homœopath's Faith* will inspire you, and you will return to Hahnemann's *Organon* with renewed ardor. The *Organon* is the homœopath's bible; it is the ever-living judge before whose tribunal the daily practice of the homœopathist must be judged. It fulfils its noblest use when accepted in this capacity, but if this age of mongrelism does not require this function, read it merely to catch the faith and enthusiasm of the time, even though the dogmatism of the master may at times offend our modern good-natured, well-bred, elastic principles.

PROFESSOR.

SKOOKUM CHUCK.

To THE HOMŒOPATHIC RECORDER:

THE name "Skookum Chuck" means, in the language of the Chinook tribe of Indians, "strong water." "Chuck" means water, and "Skookum," "strong." Hence it would be tautology to use the Latin prefix "Aqua" to designate the remedy. I hope you

will therefore use the term "Skookum Chuck" hereafter in referring to it.

I have just received the following from Dr. E. H. Peck, of Cleveland, Ohio, which will be of interest to the profession:

"A few weeks since, you kindly sent me Skookum chuck salts, 1x, and in a few minutes after receiving it a test-case presented, and I gave the remedy with astonishing results. It was a case of eczema of about nine years' standing, due to vaccination. Two or three others were vaccinated at the same time with the same matter, and all broke out. Two of them died from the effect of the vaccination and the other two have suffered since with the eczema. My patient had the worst hands I ever saw, and that is saying much. Sarrac., Petroleum (c.m.), Psorinum (42m), had done wonders; but when, after many months' treatment, there was an aggravation, they did not work so promptly. Skookum chuck, however, has almost cured the case in two weeks. It did more in that time than any other remedy did in three or four times as long. I must have a supply of the remedy."

I have received a number of inquiries regarding the local use of the remedy. A beautiful soap can be made with the crude salt by using it instead of common alkali. In the absence of the soap, a dilution may be made by dissolving about a teaspoonful of the 3d trituration in a teacupful of water, and applying it to the part.

Very respectfully,

WILLIAM D. GENTRY.

ROGERS PARK, COOK COUNTY, ILL., February 4, 1890.

[Skookum Chuck has been prepared for external use in form of an ointment with Lanoline base.—RECORDER.]

"POTENCY" AND THE INFINITE DIVISIBILITY OF MATTER.

THIS hypothesis is not presented for the first time, nor are the details brought out in full. The criticisms are meant as introductory or supplemental to the main idea.

"Potency" in the November issue (RECORDER) aptly illustrates the energy of *Merc.* by dividing it into particles. He could have mentioned *lead* with telling effect, especially to painters. One would not hesitate to swallow a piece of lead the size of a three-cent piece, but grind it as finely as found in the 3*t.*, or higher, and no consideration would induce him to take the 100th part of it. But no attempt was made to explain how one energy changed others until they partook of its identity; nor how "energy" deserted its atom and distributed itself in the vehicle or around the molecules of the vehicle. He did not hint how to imagine it.

Is it unfair to ask what potency contains the last atom to each drop of the vehicle? (1) Suppose that you arrive at that potency and call it *a*; in the next higher potency, *b*, what becomes of that "last atom?" Does it curl up like Darwin's *gemmule?* or take its chances of being in *c*, *d*, etc.? (2) If it is in *b*, then *c*, *d*, etc., contain nothing but energy; and, has *d*, as much energy as *c*, or one-half as much? By running the potency *up* would the energy come *down* in quality or quantity to the low acting power of the 1x? (3) The *c* potency, then, contains the entity energy. Is this energy equally divided among the drops? or does a portion of it cling to each molecule of the vehicle? Take either horn and you still have the entity; something that exists and is divisible, for it has parts. "Now . . . . taking a drop of the last potency containing" one of these drug particles, put ten drops of alcohol with it, then shake all of them together and what takes place? Stop us; for, is it not the next higher potency: but when do you stop?

Take *Kali bic.*, when in the last potency containing one drug *molecule* to each drop, make the next potency and what takes place? You have (1) drug atoms or (2) the energy of the molecules. If drug atoms, then they are the atoms of two different drugs, each of which "has a specific energy, distinctive, definite and absolute." Which of these atoms will change the others so that the latter will partake of its identity? You have two atoms of *Crom.* and one of *Kali*—each atom separate and distinct from its companions in the vehicle; now make the next potency from these atoms and tell us what label is used and why? (2) If you have the energy of the molecules, then you have destroyed the identity of *Kali bic.*, for you have no molecule to get the resultant of *Kali* and *Crom.* You have destroyed the paralellogram of forces and the originators separate from each other, because there is nothing to hold them together; and as in (1) you have the energy of two separate and distinct drugs.

The following hypothesis is offered to explain the entity and identity of a simple or compound drug. In the theorem p. 242, after "force" insert *innate*, *inherent* and *essential*, and *matter or substance can be divided indefinitely.*

Take a microscope with a power high enough to discover one of Prof. Haeckel's moneron, a spermatazoa or a muscle-cell. Now take one with a still higher power and, by properly staining the specimens, you may be able to see one or more organs in the once living specimens, and you can see the muscle divided into still smaller parts by lines. Suppose a microscope could be invented as far exceeding our best instruments, as they exceed the power of our naked eye, such ultimate atoms would then seem to be as large as cannon balls, and would be distinctly composed of still smaller

"ultimate atoms." With a still higher power repeat the process again and again, and—

"Small mites have smaller mites
Upon their backs to bite 'em.
And smaller mites have smaller mites
And so on *ad infinitum*."

In a proper place in a well ventilated room, place one grain of musk which has been weighed with the most delicate balance. When you enter that room, you are convinced that musk is there, for its particles strike your nostrils and meander among the hairs in a well defined direction. Let no one disturb the musk or its surroundings, and let one thousand men enter the same room each day during the next ten years and the same game of lawn tennis and battledore takes place in each nose. At the end of the ten years place that musk in the same balance, and the index will not vary the fraction of a hair. Let the drop-of-medicine-above-Niagara-Falls bigot do the weighing first and last and do any amount of smelling; if no hint of homœopathy is made, it is all right. But make a hint and deduct any number of cubic miles of air, and he will not attempt to figure what potency of musk will affect the human nerves.

Medical Advance, November.—"(Homœopathic Dilutions in the Light of Daily Experience and Common Sense). . . . The essential part of the trail (spur) is something perceptible to the sense of smell, a peculiar matter belonging to the individual. And how much of it? . . . . And how minute is the quantity of this matter which a man produces? Of it only an extremely minute portion adheres to the soles of his boots. Of this again only a much smaller part is given off to his tracks. And how small this must be when the supply on his boots suffices to give off to each step, and that to the last one when a man has walked all day. . . . And further, if this matter were not volatile a dog could not smell it, and in everything that is volatile there is a constant degree of quantity. The tracking animal follows the trail not only after hours, but if rain or snow has not fallen, even after several days; that means after a time in which the first already infinitesimal quantity has lessened to an extraordinary degree. Finally, the trailer does not use all the infinitely small quantity that adheres to the steps, but that suffices which he carries off in his nose which, is only a minute portion of that which remains. . . ." Now, can any candid mind deny that there are thousands of particles left in each footprint, even after the dog fails to smell them?

The substance, *ether*, if it really exists, is as much more highly attenuated than the above particles, as you can think. Prof.

Tyndal says that it "has definite mechanical properties. It is almost infinitely more attenuated than any known gas, but its properties resemble a *solid* rather than that of a gas. It resembles *jelly* rather than air." And how many molecules has a drop of ether? Musk, particles from a man's boot, ether or any other substance—when do you arrive at that potency containing a *molecule* to each drop of the vehicle?

Dr. Lewis Sherman claims that, in an average drop of liquid, there are 1,000,000,000,000,000,000,000 molecules. His scientists got such a small number, because they supposed that the molecules were as far apart, proportionately, as the planets in our solar system are from each other. What material these vast spaces between the molecules are filled with was never made known to the writer. But the truth is, the molecules were not found so, but were pryed away from each other to bolster up a *wave theory* that *died ten years ago.* But nature utilizes those vast and useless spaces and packs them full of the same kind of molecules as are in the material; and Dr. S.'s figures fall as far short of the approximate number of molecules in a drop of liquid as this solar system of ours falls short of being packed full of asteroids.

LEWIS F. ACERS, M.D.

SAC CITY, IOWA.

SOME OF MY MOST IMPORTANT EXPERIENCES IN HOMŒOPATHIC PRACTICE WITHIN THE LAST FIFTEEN YEARS.

BY DR. J. KAFKA, OF PRAGUE.

(Translated for the Homœopathic Recorder.)

AFTER a pause in literary labors of several years' duration, due entirely to excessive amount of work connected with practice, I regard it a duty, before leaving the arena of practical activity forever, to communicate the most important and interesting experiences which I have had in diagnosis and therapeutics.

I am convinced that the publication of extraordinary and difficult cases, particularly when they were of long duration and had been treated unsuccessfully by allopathic methods, or when the disease was protracted and severe, and a cure effected nevertheless by a well-selected homœopathic remedy, or when the selection of the remedy depended upon comparisons with analogous diseases, or necessity demanded that other and most unusual methods for the incorporation of the effective homœopathic remedy were required,

is not only very instructive but also induces others to experiment in a like direction, whereby the possibility is presented that many of our colleagues shake off their indifference and either confirm, or prove my experiences worthless.

"Exempla trahant" is an old proverb; the erection of theories concerning the origin of disease we leave to specialists in pathology. Our duty is, and still remains, the cultivation of reliability and circumspection in the management and cure of various diseases; and our results should not be withheld. To remain silent concerning difficult and important homœopathic cures is an offense against homœopathy, as the latter can and will obtain recognition and influence only by its brilliant results.

1. Acute croupous bronchitis, cured after occurrence of seven relapses.

This disease, as is well known, belongs to a class of affections not frequent in occurrence, but at the same time very dangerous. To the ancients it was known as bronchitis polyposa. At the end of the seventeenth century, Clarke described a case, calling it bronchitis fibrinosa. At the end of the eighteenth century, J. Hunter published a case with illustrations. While finishing my medical studies at Vienna, in 1834, Joseph Edler v. Hildebrand, professor of clinical medicine, delivered a lecture on fibrinous exudations of the bronchi, and called attention to the dendritic form of the same after being washed under water; he also displayed several specimens preserved in alcohol. Rokitansky, who at that time acted as prosector at the Pathological Anatomical Institute of Vienna, called our attention to the white, pearly coagulations which appeared upon cutting into the diseased lung, giving forth under the knife a grating sound similar to that caused by gritting the teeth. Already at that time these exudations were designated as croupous. Since then, the knowledge of croupous processes has become much more extensive, due partly to the study of morbid anatomy, and partly to numerous clinical observations and descriptions. So much, however, is certain, that croupous bronchitis belongs to the category of dangerous diseases, and, according to Bierner, few cases are known in which a favorable termination occurred.

This statement determined me to publish the case referred to.

On December 3d, 1881, I was called to J. Ranzen, merchant, of Prague, æt. 32, a man of blonde complexion, slender build, and pale appearance, pretty muscular, married, who had passed through the Franco-Prussian war of 1870 to 1871, and then settled at Prague. He had until now been in good health, suffering only from a catarrh of nose and pharynx; for several days has had constant cough, day and night, tussive efforts being very violent; the rattling of mucus in chest was so loud that it could be heard in an adjoining room,

although expectoration was very difficult and caused dyspnœa. Upon examination, I found the thorax well arched, clavicular regions not sunken, neck long, scapulæ not prominent, impulse of heart in normal situation, epigastrium not retracted; moderate elevation of temperature, about 38° C.; pulse, 92; slight thirst, anorexia, slimy taste in mouth, tongue coated, no distension of abdomen, stool delayed; urine scanty, high-colored, containing neither sediment nor albumen.

Percussion note was everywhere resonant; loud mucous râles extended over both lungs, but no bronchial breathing or crepitant râles could be detected, only large and small mucous râles in some localities becoming sibilant in character, as if imprisoned air were escaping through a narrow orifice; respiration was very difficult, 30 per minute, the exertion thereof causing sweat on forehead; patient had no appearance of anxiety, lips and nails were not discolored, and temperature of extremities was normal; expectoration was very difficult, slimy and mixed with much saliva, but no blood; vomiting, due to severity of cough, had not occurred.

The patient's family history is good; he ascribes cause of disease to frequent crossing over a bridge in a sharp wind at night.

With this history there is evidently no pneumonia present, but a general catarrhal inflammation of the bronchi (Bronchitis Catarrhalis Universalis).

The course and treatment of this important case will be dealt with in a summary mamner, as the relation of details would not only take too much space and time, but also require much patience. Despite the use of Bryonia, Phosphorus, Tartaric emeticus, and Ipecac., each of which were given hourly for twenty-four hours in water, not the slightest amelioration occurred after four days had elapsed. On the contrary, the condition of the patient became very serious, as somnolence (due to Carbolic acid poisoning), faintness (due to cardiac weakness), and great paleness of skin supervened. These threatening symptoms induced me to give the sputum a thorough examination.

To attain this, on the 7th of September the patient was made to expectorate several times into a glass half-filled with water; the sputum was then thoroughly washed by means of a small stick, and then spread upon a sheet of paper. Already, during the process of washing, larger and smaller casts, adhering to each other, and thus having a stringy appearance, were noticeable, and when spread upon the paper and held to the light the dendritic or arborescent form of these casts was distinctly visible, and could be recognized as fibrinous exudations of the bronchial tubes, the form of which they retained.

Croupous inflammation of the bronchial tubes was at once assured, and an indication for a change of treatment demanded.

Having been taught by many years' experience that croupous inflammations yield more rapidly to the iodides than to any other remedies, I immediately put ten drops of the first dec. dil. of Kali iod. into a half glass of water and gave two teaspoonfuls every two hours.

Early in the afternoon symptoms of improvement set in; respiration became easier, expectoration less difficult, mucous râles less audible, somnolence decreased, faintness disappeared, and the general appearance improved.

In the evening I found the patient quite cheerful; expectoration was easy, dyspnœa but slight, mucous rattling less pronounced, and there was present an enjoyable sensation of comfort.

Improvement continued steadily, expectoration of mucus being quite easy, râles gradually diminished, cough was less frequent, and after six days disappeared entirely; thus, the course of this dangerous disease was checked, after which the patient rapidly regained his health.

For several weeks the patient pursued his business, complaining of nothing; but towards the end of October of same year the first relapse occurred, due to same cause as that of primary attack, namely, exposure to cold night air while crossing bridge.

This relapse pursued a course precisely similar to the attack described above, and was treated in a like manner. Only after the remedies first mentioned, to which were now added Hepar and Spongia, both of which have frequently proved efficacious in croupous laryngitis, was Kali iod. given, and again rapid improvement and speedy cure was effected.

In this manner there occurred in the course of a few weeks six more relapses, all due to the same cause, and all treated alike.

The recurrence of attacks only ceased when the patient moved to the opposite side of the river, thus avoiding the exposure of crossing at night.

Judging from the course the disease took, it is evident that exposure to cold winds and raw night air is particularly favorable to the development of croupous bronchitis: this is confirmed by Lebert, Biermer, Riegler, Bettelheim, etc.

According to my experience croupous bronchitis is not so dangerous a disease as generally supposed. In the treatment it is of the utmost importance to examine the sputum. The expectoration, according to Lebert, Biermer, and Riegler, is, as in the above case, at first mostly catarrhal, and only after four or five days have elapsed does the fibrinous or croupous exudation develop, and as soon as this condition is established the use of the iodides is indispensable.

The use of the well-known and efficient remedies for catarrhal inflammations, given early, as seen above, has always been without results. Kali iod. was not used until there appeared somnolence and faint-like weakness, and then the results were striking.

These two conditions are also guiding in croupous laryngitis. Should the condition be overlooked or not noticed, there occurs a high degree of ammoniæmia and cardiac weakness, and a fatal termination is unavoidable; even laryngotomy is then useless. The examination of the sputum is indicated and imperative in bronchitis, whether acute or chronic, when expectoration is hindered, and does not become rapidly loose under the above-mentioned remedies. As soon as the arborescent fibrinous casts are found, Kali iod. is the most applicable remedy to loosen the tough expectoration, whereupon a speedy cure generally follows, a fact to which I called attention twenty-five years ago, in my work on therapeutics.

The application of Kali iod. in the above form and dose is all-sufficient. Larger doses often produce a marked aggravation, while the higher potencies do not develop such precision of action. Pure Iodine is also efficacious, but the second or third decimal dilution must be given afterwards.

As soon as the mucous râles and expectoration cease, Kali iod. must be replaced by Pulsatilla or Natrum muriaticum to finish the cure. As a rule the patients recover rapidly.

The use of Kali iod. is not in perfect accordance with the law of similarity; because of its excellence in laryngeal croup, I have tested it in croupous pneumonia as well as in croupous bronchitis, and have been well satisfied with the results obtained.

2. Observation upon myself.

On the 27th of November, 1888, I was summoned as a witness in a suit brought by the State-Attorney against a nurse of one of my patients. I was at that time suffering from a slight catarrhal inflammation of throat and bronchi, and, being compelled to overtax the organs of speech and respiration in giving evidence and citing records, I was seized at night with severe paroxysms of coughing, accompanied by loud mucous râles. I took several doses of Nat. mur., 6x, a remedy which has often proved useful to me for the ill-effects resulting from excessive use of vocal organs. The following day was passed pretty comfortably, but at night the cough and mucous rattling returned. Improvement again occurred after Nat. mur. so that on the morning of the 29th I could pay several necessary visits.

On the 30th of November, however, I suddenly awoke about 12 A.M., feeling greatly depressed and affected with a glowing heat; a cough more severe than ever set in, accompanied by loud rattling of mucus, detachment of which was extremely difficult. The ap-

pearance of fever occasioned me to rise from bed; and upon noticing that the expectoration, which apparently consisted of mucus and saliva, was stringy and tenacious, and difficult to remove from lips and tongue, I determined to make an examination thereof. I accordingly expectorated several times into a glass of water which had been previously placed near at hand for the night, washed the sputum carefully with a match, and spread the remaining portion upon a sheet of white paper. The dendritic formation was distinctly visible, and thereby a diagnosis of croupous bronchitis established. The temperature had risen to 39° C., and pulse increased to 120. Without wasting any time in considering whether I should take Aconite or Phosphorus, I determined immediately upon the use of Kali iod., as in the case above; the dose, however, being more frequent, two teaspoonfuls being taken every fifteen minutes. Already after the fourth dose, that is, within three-quarters of an hour, the temperature had fallen to 38° and pulse to 100; and after the sixth dose the expectoration was less difficult, and the râles had diminished. About 5 o'clock I felt quite comfortable and fell asleep, waking about 7 o'clock in an apparently normal condition. The attack was broken, and I recovered rapidly.

I make known these personal observations for the reason that some important practical suggestions can be drawn therefrom.

The first hint for a thorough examination of the sputum is given when expectoration is difficult to detach, and is drawn out into thick, firm strings, which hang tenaciously to tongue and lips. To this special feature no reference has been made by any one, although I have several times found, particularly in chronic bronchitic affections, that patients themselves call attention to this condition. For over thirty years I had under treatment a case in which two or three attacks of catarrhal bronchitis occurred annually. In 1884 the disease became obstinate despite the use of former successful remedies. One day I was led to examine the sputum by the patient stating that the expectoration was stringy and very solid. The presence of fibrinous, dendritic casts at once indicated the use of Kali iod., whereupon the patient, an old man of seventy-two, was quickly cured.

The use of homœopathic remedies in rapidly succeeding doses is to be recommended in very acute, febrile and painful affections, as well as in dangerous cases. I have been constantly interested in the treatment of dangerous diseases, and found the rapid action of homœopathic remedies in rapidly succeeding doses confirmed, by all the most celebrated practitioners of Vienna, Budapest, Dresden, Leipzig, Berlin, Hanover, Munich, etc., with whom I came in personal contact during the annual conventions of the Homœopathic Central Society of Germany during the years 1855 to 1876. Even

Hahnemann, Rummel, Vehsemaier, Veish, Schweickert, Reubel, Rosh, Lobethal, etc., gave frequently repeated doses, as can be instanced in the articles on cholera, dysentery, etc., in Rückert's *Homöopatischen Erfahrungen.* I have often been called late at night to children and adults suffering from a sudden febrile attack, where the temperature had already reached 40° or over, or who were suffering from some painful disorder. Here Acon., Bellad., Merc., etc., in solution, every ten or fifteen minutes, was followed by relief after a few doses, the fever subsiding or sweat developing, so that the patient spent the remainder of the night quietly.

Antipyretic treatment in homœopathy is not guided by the thermometer, but by the causes of the disease and the morbid phenomena presented by the case from time to time, and in accordance with which the selection of a remedy upon a physiological pharmacodynamic basis, or according to the law of similarity, is determined.

We regard fever simply as symptomatic of the invasion of acute disease, or as an accompaniment of an already existing disease, which may be catarrhal, rheumatic, gastric, inflammatory, psychical, infectious, malarial or dyscratic in nature.

In homœopathy, fever never becomes a sole object of treatment; the co-existing causes and symptoms are always taken into consideration.

Physicians who regard a rise of temperature to 40° C. as an onset of some severe or dangerous disease, are liable to frequent deceptions, inasmuch as a suddenly appearing sweat, diarrhœa, epistaxis or vomiting is often followed by a complete cessation of fever, whereupon the condition again becomes normal.

In the above case the fever was an accompaniment of croupous bronchitis. The prompt use of Kali iod., in frequent doses, caused rapid restoration to health, which could not have been so easily accomplished by any other method of treatment.

THE SPARE HOUR.

No. 2.

HAVING lately spent a few pleasant evenings with an ancient physician who retired from practice on the 7th of September, 1681, I have thought that a few notes of his experiences might be of interest.

Our venerable friend was born in 1629, and took his degree of M.A. at Oxford in 1652. He became a clergyman of the Church of

England, and in accordance with the usage of the seventeenth century, he studied medicine, so that when King Charles the Second appointed him to the Vicarage of Stratford-upon-Avon, in 1662, he both preached and practiced. He left a common-place book, consisting of seventeen manuscript duodecimo volumes, in which the entries extend from 1648 to 1679. He had, doubtless, seen Harvey, who died in 1658; he had read the *Religio Medici* and *Paradise Lost*, in the *editio princeps;* he had heard with awe of the beheading of King Charles the First, and of the "Great Plague" in 1665, and the terrible "Great Fire" of 1666. He was in London, a medical student at "Barber Chirurgeon's Hall," in 1661, and under the date of June 14th, of that year, he writes: "I saw Sir Henry Vane beheaded on Tower Hill, and he was much interrupted in his speech, because he reflected on his judges."

In 1661 there was only one place in London where public anatomical lectures were delivered, namely, the afore-mentioned "Barber Chirurgeon's Hall" in Monkwell Street, and of the doings there we have this glimpse: "February 26th, 1661, I was at Barber Chirurgeon's Hall, where I saw Dr. Scarborough's picture, and in the theatre there are skeletons, and one statue there is resembling the muscles. One skeleton there is over the table, to let down for inspection in time of dissection. Dr. Scarborough had a wooden man wherein the muscles, with all their motions, were represented; itt cost him ten pounds; hee brought it to an anatomic one day, and itt was stolen from him; hee declared in open hall that iff any man could help him to itt again hee would give him five pounds. Dr. Terne should have read, but he was sick. There are but two anatomies in a yeer at Barber Chirurgeon's Hall, besides private ones." At a later date he heard two anatomical lectures read by Dr. Terne, "the one on the heart and midriff, the other on the head."

"Two anatomies in a yeer" doubtless means the dissecting of two subjects in a year, and we can now better understand the following: "Dr. Sydenham is writing a book which will bring physitians about his ears, to decrie the usefulness of natural philosophie, and to maintaine the necessitie of knowledg in anatomie in subordination to physick. Physick, says Sydenham, is not to bee learned by going to universities, but hee is for taking apprentices; and says one had as good send a man to Oxford to learn shoemaking as practicing physick." [I can testify that universities have improved some in latter days, but it must be admitted that the "wooden man" holds out there yet and—*draws a salary;* which Dr. Scarborough's couldn't do.]

The extent of our old friend's "anatomie" may be judged from this leaf of his notebook: "A woman, Goodie Southerne, in great paine in her hips and thighs by a fitt of the stone, and vomitted

much; the reason of the vomiting in the stone is by reason of the connexion of the reins with the stomach, by the common membrane borrowed from the peritoneum, and likewise by a nerve of the sixth conjugation, two branches whereof are brought from the stomach, and inserted into the inner tunick of the kidneys." We can, however, learn from this that the "Knowledg" of "anatomie" was progressing, for in 1578 *the* anatomical text-book of "Barber Chirurgeon's Hall" thus described the nerves of the Kidney: "*The sinew commyng to the kidney is small in proportion, annswerable neither to the arterie nor veyne of the kidney. For they are offred for the cause of nourishment and heate. But for sense sake, nature caused to either of them to be reached one braunch from the vi payre, sent to the rootes of the ribbes, which rather into the coate then into the body of them is dispersed.*"*

In 1665, he records a surgical operation: "A cancer in Mrs. Townsend's breast, of Alverston, taken off by two surgeons. First they cutt the skin cross and laid it back, then they worked their hands in ytt, one above and the other below, and so till their hands mett, and so brought itt out. They had their needles and waxt thread ready, but never ust them; and also their cauterizing irons, but they used them not: she lost not above six ounces of blood in all. Dr. Needham coming too late, staid next day to see it opened. Hee said itt was a melliceris, and not a perfect cancer, but itt would have been one quickly. There came out a gush of a great quantitie of waterish substance, as much as would fill a flaggon; when they had done, they cutt off, one one bitt, another another, and putt in a glass of wine and some lint, and so let it alone till the next day; then they opened itt again, and injected myrrhe, aloes, and such things as resisted putrefaction, and so bound itt upp againe.

"Every time they drestt itt, they cutt off something of the cancer that was left behind; the Chyrurgions were for applying a caustick, but Dr. Needham said no, not till the last, since shee could endure the knife.

"The way how and where itt should bee cutt was markt with ink by one Dr. Edwards."

This rude memorandum shows what a subservient position the surgeon held in those days.

The outcome of this case affords us a glance at an old-time *post-mortem*: "1666. Mrs. Townsend, of Alverston, being dead of a cancer, Mr. Eedes and I opened her breast in the outward part, and found itt very cancrous; itt had been broken, and a mellicerous part was yet remaining when we saw itt, which being launct, yielded two porringers full of a very yellow substance, which came out plentifully out of the cavities of the breast.

---

* *The History of Man*, etc., fol. 83. London, 1578.

"The flesh that was growne againe, after part was taken out, was of a hard gristly substance, which seemed very strange. The ribbs were not putrefied as wee could discerne, nor anything within the breast of a cancrous nature, for wee run the knife withinside the breast through the intercostal muscles. The cancer was a strange one, as was evident; we wanted spunges and other things convenient, or else wee had opened the cavitee of the breast."

We find two hints worthy of notice: "There is not a more excellent balme for a burne than spirit of salt [*id est*, Muriatic acid], in a moderate quantitie of water."

"Three spoonfuls of the juice of stinging nettles [*Urtica urens*] in posset drink, with three mornings intermission, is a certain cure for the stone."

[Dr. John Pechey says of the Nettle: "'Tis Diuretick and Lithontriptick. Eaten with Pot-herbs, it loosens the Belly, expels Gravel, and promotes Expectoration. . . . . The Juice of Nettles cures the Stings of Nettles presently.]

That our old priest-physician was a shrewd observer of human nature, and woman nature, is evidenced by this note of his: "*Fæminæ sunt medicorum tubæ.*"

One other item may interest obstetricians: "Dr. Chamberlayne, the man-midwife, lives in the Abbey Churchyard; his fee is five pound, yett I heard, if he come to poor people hee will take less." Considering the relative value of money, Chamberlain got one hundred dollars for his forceps-cases. S. A. J.

BOOK NOTICES.

Diseases of the Eye and Ear.—By C. H. Vilas, A.M., M.D. 117 pages, 8vo. Chicago. 1890.

This book is the outgrowth of the notes and lectures of Dr. Vilas in his capacity of teacher in the Hahnemann Medical College of Chicago. Prepared originally for his own convenience, they have been added to from time to time and finally prepared for publication, and "the words of commendation heretofore received from old students (now practitioners) indicate that this new volume will prove valuable to others who, though they may decline all operations, are compelled from the nature of the diseases to treat many of them and alleviate others until such a time as the patients can be safely sent away." These words, quoted from the introductory note, indicate how useful this work may be to every general practitioner, by giving him a concise and clear description of the diseases of the eye and ear and the appropriate treatment, both

homœopathic and external. The price is $1.50; net to physicians, post-paid, $1.28.

Klinische Arzneimittellehre. Eine Reihe von Vorlesungen, gehalten am Hahnemann Medical College in Philadelphia von dem verstorbenen E. A. Farrington, M.D. Aus dem Englischen übersetzt von Dr. Herman Fischer. 1 Lieferung. Leipzig. Verlag von Dr. Willmar Schwabe. 1889.

The first volume of Farrington's well-known *Clinical Materia Medica*, translated into German by Dr. Herman Fischer, and published by Dr. Willmar Schwabe, is to hand. It is 160 pages, and runs to "Phytolacca" on page 171 of the original; the remaining portion will appear promptly, and the entire work be completed in four parts. Every German and English scholar who has examined the translation says it is very felicitous, the charm of the original being retained in the translation. The price per part is $1.00.

The Twelve Tissue Remedies of Schüssler, comprising the Theory, Therapeutical Application, Materia Medica, and a Complete Repertory of these Remedies. Arranged and compiled by William Boericke, M.D., and Willis A. Dewey, M.D. Second edition. Revised and enlarged. Philadelphia. 1890. 325 pages. Cloth. $2.50.

This new edition is twenty-two pages larger than the first one, the extra space being taken up "by the addition of all the facts relating to the tissue remedies that have accumulated for the past two years." In its present state the book represents the complete presentation of the biochemical treatment of disease by means of the twelve remedies. A number of the clinical cases included in the first volume have been omitted and their places filled by newer and later cases. The Materia Medica part of the work is brought up to date by the incorporation of the results of late provings. The net price of the book to physicians, post-paid, is $2.14.

There is a certain fascination—to the reviewer at any rate—in floral catalogues. They always come to us in the winter season, and bring with them a whiff of summer. The 1890 catalogue of James Vick, Rochester, N. Y., is before us, and is a handsome and complete work. May be had of the publisher for 10 cents, which amount is deducted from any purchases made.

We have received a copy of *Directory of Homœopathic Physicians*, published yearly by H. A. Mumaw, M.D., Orrville, O. It embraces the States from Pennsylvania to Nebraska, and south to Tennessee. The price is 10 cents.

"**Professor Allen** half apologizes for the 'clinical sections' of his *Handbook. They alone are sufficient to justify the publication of this unwieldy book, and they alone will make the book cheap at any price to the practitioner.*"—Samuel A. Jones, M.D., in *N. Y. Medical Times.* (*Italics*, Dr. Jones's.)

VETERINARY DEPARTMENT.

On the Use of Ichthyol in Veterinary Practice.—By *Rabe*—Rabe, in a lecture, speaks warmly on the results which he has obtained from the remedy in canine practice. He used it with excellent results:

1. *In Mange from Sarcoptes* (10 per cent. solution), rubbing the Ichthyol liniment over the entire body nearly, in some cases without seeing in dogs and cats any disturbances of the appetite or albuminuria.

2. *In Mange from the Acarus* (*Psora*), where it is extremely difficult to remove and resisting the usual and even the stronger external applications (three cases of recovery).

3. *In Chronic Eczema*, Ichthyol excelled all the other remedies, used in a 10 per cent. solution.

4. *In Diffuse Purulent and Pustulous Eczema, Prurigo, Erythema, Erysipelas of the Head, of the Mammæ, of the Prepuce and Scrotum*, a 5 per cent. solution of Ammonium sulpho-ichthyolicum had an excellent action. In the latter affection, the application twice of a salve of 50 per cent. of Lanoline with 3 per cent. of this remedy, produced a striking improvement.

According to the experience of the writer, the use of equal parts of Ichthyol and something to correct the odor, is an excellent remedy in *Eczema Intertriginosum* and *Erythema Exfoliaticum of the facial skin.*

5. *In Swellings after Bruises and Traumatism* (Chronica).

6. *In Gonarthritis of the Knee-joint*, which, according to the writer, is more frequently seen in dogs in Hanover than anywhere else.

7. *In Traumatic, Ulcerous, Parenchymatous and Vascularizing Inflammations of the Cornea*, it has been used with excellent results in a 2 to 3 per cent. aqueous solution of the Ammonium sulpho-ichthyolicum.

Internally, 2 to 4 per cent. solutions (aqueous) may be given with very good results in chronic and acute gastric and intestinal catarrh, with or without icterus; it has also been used with good results in "staupe" (a deeply-penetrating catarrh of the air-passages, accompanied generally by intestinal catarrh, nervous symptoms, etc.—*Adam's Wochenschr. für Thierh'k'de und Viehz.*, xxxi., p. 24.

"Corn-stalk Disease."—Frank S. Billings, M.D., has been investigating what is known as the "Corn-stalk Disease," and reports his discoveries to the Buffalo *Medical and Surgical Journal.* This disease often attacks cattle which have been turned into corn-fields that have been "topped." It is an acute blood-poisoning, with fever from 102° to 107.6°; weak pulse; rapid respiration; the animal will either bellow and chase other animals, or stand depressed and loth to move; retains its power to swallow and drink; constipation, which in favorable cases turns to diarrhœa; urine normal; yellowish-red congestion of mucous surfaces; milk slackens or ceases. "The *post-mortem* microscopic changes are those of acute septic febrile disease. The disease is not conveyed by one animal to another."

The farmers were sorely puzzled. Only certain fields or parts of fields were dangerous. They could never tell when a valuable herd would be decimated, if turned into a fodder-field. Various theories, easily disproved by experiment, were prevalent among farmers. It was held to be caused by lack of salt and water for the cattle; by dryness of the fodder; by smut (*ustilago maidis*); but it was seen in cattle which had water and salt; and the dry-food theory was shown to be false. Moreover, cattle fed on large quantities of smut were not made ill.

The growing corn was now examined. In the diseased patches the plants were stunted, if attacked in early summer. The lower leaves die, becoming yellow, with colored streaks. The roots decay in the ground, even the brace-roots becoming corroded. The ears do not mature.

Microscopic examination of the leaf-streaks and other diseased parts reveals the presence of an organism which is now believed to be the cause of the disease. It is never found far from parts which are plainly diseased, and it invades the healthy tissues at the edge of the affected areas.

The germ resembles very closely that of the Southern *cattle plague* or *wild-seuche*, and of the swine plague. It is ovoid, its length being about one-sixth the transverse diameter of a red blood-cell. When stained it resembles a small white bean, with both ends and two sides stained. It moves by a sort of rolling action. Dr. Billings supposes that the white, non-coloring substance is a secretion of the two poles or coccoid ends, and that it may constitute the ptomaine or essential poisonous pathogenic principle of the disease, which gets into the fluids of the animal body by the breaking up of its capsule, which occurs as the germ becomes mature.

The only treatment he recommends is Glauber salts to clear out the intestines.

In Norway they set a bucket of water in the stalls of horses beside their allowance of hay or oats, and let them moisten their food to suit their taste. They do not drink much at a time, but frequently take a sip with apparent great relish. It is hinted that this prevents broken wind, as such an ailment is hardly known in Norway.

Rheumatic Lameness.—The horse of a captain of Uhlans, v. T., was afflicted for a long time with an aggravated attack of lameness of the shoulders, and after ringing the changes of all possible old-school treatment, the owner was advised to try to get rid of his horse as best he could, for the affliction was incurable, advice which he was loth to follow, as his was a fine animal. As the sick horse was located at some distance, it could not be inspected, and the veterinarian, Dr. H. Fischer, of Berlin, had to rely on the history as given by the owner and by the old-school veterinarian who last had it under treatment. The latter, moreover, deprecated the possibility of its being influenced favorably by homœopathy, averring that if it did, he would take up and study that branch of medicine. In view of the fact that all manner of embrocations had already been used in vain, Dr. Fischer concluded to treat this chronic case by internal medication only. The prescription was Ferrum mur., 3x, and Rhus tox., $3x^{d}$ dil. in attenuation twice a day. The effect was astounding, exceeding the doctor's whole previous experience, for the horse was in perfect condition again two weeks from the commencement of the treatment.—*Fundgrube* for February, 1890.

Pink-Eye.—A four-year-old colt, half-blood Texas pony, December 21, 1889. Coryza, watery, running; worse when heated by least exercise. Great debility; weaving, staggering weakness when exercised. Stiff in legs, more or less all over, and sore as if overworked. No cough. Worse in morning—could hardly get out of stable. Pinkish, glassy eye, and running water of the same color. Sweats very easily on least exertion, and worse from exercise. Drinks but little at a time. Shortness of breath; panting, heavy respiration as though he had been running. Lost appetite. Arsen. alb. 3x, 6 disks three times a day. Rapid and steady improvement. Four doses relieved. Well the third day. Runs and plays as usual.

This remedy was also given to some colts which had pinkish, watery eye, running at nose and a few mild symptoms. Several doses entirely relieved and cured.

W. A. YINGLING, M. D.

NONCHALANTA, KANSAS, January 6, 1890.

PUBLISHERS' DEPARTMENT.

MULLEIN OIL.

MESSRS. BOERICKE & TAFEL:

I have been much interested in the clinical study of this remedy, —new, yet not new,—but I have not succeeded in demonstrating what the symptom-deafness means in this case. Dr. Cushing does not claim to be an expert in this department, so time must help us out, and I am anxious to learn all I can of its effects on the ear.

In an old note-book of Dr. Hering's, *Hearing and Ears*, copied for me with the author's permission by my friend Dr. C. R. Norton, I noticed the following: "In Germany flowers of Verbascum thapsus put in a dark-colored bottle, hung up in the sunlight, give in two or three weeks an oily fluid which has cured many old people and children." This method is impracticable, the amount produced being so small. Verbascum prepared in olive oil or fluid petroleum has the same effect as any oil; excellent in chronic disease of the integument; negative in middle ear disease. When your house brought out *Mullein Oil* under Dr. Cushing's direction I took it up again, and have prescribed it in a large number of cases. In chronic dermatitis of the external meatus and drum head, or exfoliation after furuncle, it is excellent; in chronic catarrhal inflammation of the tympanum I have not been able to see any effect, but in chronic suppurative disease of the tympanum, or in accumulations of detritus in cases of perforation, scarred drum-heads, etc., it acts to dislodge accumulations, free the ossicula from pressure, and thereby improves the hearing; this process goes on for months till the tympanum has thrown out an amount of *débris* that is surprising. In a few cases it has caused soreness and increased mucopurulent discharge, due, I think, to excessive use.

My experience with it in chronic catarrh of the tympanum coincides with that of my friend, H. P. Bellows, M.D., of Boston, as published by him, but I purpose to continue the study of the drug, and hope for better results. In sub-acute or chronic disease after suppuration its effect is very gratifying; it aids exfoliation and checks irritation from exfoliated material.

I am able to confirm the symptoms noted of its effects in nocturnal enuresis in many instances. There is one effect I have not seen noticed by any observers: relief of night cough. More than ten years ago Dr. H. A. Tucker, Brooklyn, N. Y., told me of a *Glycerole of Mullein* made by macerating the plant in Jamaica rum for two or three weeks, expressing it and adding to this product an equal quantity of glycerine. This led me to the use of the fluid

extract of the plant, glycerine and water, equal parts, as a mollifier in cases where patients would resort to some popular remedy containing opium or similar opiate. The same effect can be produced by drop doses of *Mullein Oil*, the teasing cough which comes on lying down, preventing the sleep, usually yielding to a few doses.

HENRY C. HOUGHTON,

February 13th, 1890. 7 W. Thirty-ninth St., New York.

Sanicula.—H. M. Bascom, M.D., of Ottowa, Ill., furnishes us with the following points concerning *sanicula:*

"At one time, some ten years ago, there was an exhaustive analysis made of the water by a prominent chemist of Yale college, I think. My best recollection is that the Sulph. of magnesia was found in excess. I know of no other time when the salts have been evaporated. The medicinal action is upon the excretions: 1st. Increased urination, both frequency and amount. 2d. Increased action of the intestinal tract, in some cases causing profuse watery evacuations. 3d. Is sought after by chronic dyspeptics, and chronic rheumatics; seems to have an alterative effect. At one time, when the spring was quite popular, it was remarked that a few months later several cases of sterility were cured. Whether this fact threw disrepute upon the spring I am unable to say. I have always considered the spring valuable in many cases of chronic trouble for its alterative effect, clearing up the kidneys, or rather the whole system. Have never gone into any exact proving of the drug."

TO THE HOMŒOPATHIC RECORDER:

Nuphar Lutea.—Loss of strength. Excessive moral sensibility.

Diarrhœa.—Character is yellow, without colic in morning; in evening diarrhœa, which is part of this remedy, there is much flatulence. Chronic diarrhœa; stools watery, painless, quite copious, yellowish color, *very offensive;* frequent, as many as twelve in a day; a feeling of physical exhaustion is constant. Urine deposits a copious red sand.

Skin.—Psoriasis.

H. D. CHAMPLIN, M.D.

CLEVELAND, O.

TO THE HOMŒOPATHIC RECORDER:

Skookum Again.—Dr. Gentry's article is very laughable to us Washingtonians on the *Skookum Chuck.* There is no such lake; the lake is known simply as Medical Lake. Skookum in Chinook means "good," "strong," "strength." Chuck means "water," "food," "river," "stream," according to the inflexion of the word. Skookum Chuck means "rapid current." The salt is known all over this

country as "Medical Lake Salt." If I knew Dr. Gentry's address I would send him a dictionary of Chinook jargon. Don't publish any more "Skookum Chuck" articles. It is easier to correct it now than after awhile.

Respectfully yours,
W. A. EGBERT, M.D.

WALLA WALLA, January 24, 1890.

[Even Dr. Gentry may be pardoned for not being familiar with the Chinook lingo, but it certainly seems that barbarous "Skookum Chuck" is a more distinctive name than "Medical Lake." However that is a matter of taste. No doubt Dr. Gentry will be happy to receive a dictionary of Chinook. It may be addressed to him at Rodgers Park, Chicago, Ill.—RECORDER.]

Theridion Curassavicum.—The supply of this remedy heretofore has been confined to dilutions made from the original from which Dr. Hering made his proving, but now through the courtesy of Dr. J. A. Terry, of New York, Messrs. Boericke and Tafel are enabled to offer a new supply and in lower dilutions than heretofore. We find the following "clinicals" scattered through Allen's new *Handbook* under Theridon:

"Hysteria, with loquacity and feeling as though head did not belong to her, or as if she could lift it off, great sensitiveness to light, etc. Scrofulous diseases of bones, rickets, caries and necrosis.

"Violent headache, with nausea, cannot bear the least noise; a feeling as if the vertex were separated from the rest of the head, or as if she would like to lift it off. Effects of sunstroke with most intolerant headache, nausea and vomiting."

"Nasal catarrh, with offensive, greenish, yellow discharge."

"Sea-sickness in women, nausea increasing with closing the eyes."

"Dysmenorrhœa, intense in left ovary, with intense headache, extreme sensitiveness of the cervix, chilliness, etc., syphilitic cases."

"It has been used in some forms of phthisis, violent stitches in the upper part of the left chest, extending to the back. Convulsive cough with peculiar vertigo. Violent cough, with spasmodic jerking of the head forward and the knees upward."

In Hale's *New Remedies*, Therapeutics, we find the following, among other things, concerning *Theridion*: "It is homœopathic to the headaches, so common to many women, which always begin with 'flickering before the eyes.' It also cures that symptom when unconnected with headache." "It cures a vomiting when closing the eyes, and when it resembles that of sea-sickness." It is also said to cure a "peculiar severe pain in the side" which resists all other remedies.

Dr. William Boericke in the *California Homœopath* says of this

remedy: "*Theridion* is very valuable in destroying the cause or caries in scrofulous people. It has stinging pains in various parts of the body and a continuous aching in left chest near articulation of floating ribs."

It is a remedy that has never come into general use, but it seems to have a place of its own for all that. It may be had in the 3d dilution.

Calendula in Deafness.—Dr. Robert T. Cooper furnishes the following important information concerning *Calendula* in deafness. We quote from *Homœopathic Review*:

We will now discuss the question of the influence of our old friend Calendula officinalis upon the ear. This is a subject that I flatter myself is altogether new.

Last January there was attending my out-patient department an engineer's apprentice, who had been under me for over two years, during which he had remained in a stationary condition, and before this had been a patient at an Ear and Throat Hospital, where he had got decidedly worse. He had been deaf since childhood, his body having, after vaccination, been covered with an eruption which was cured at this hospital, and the evidence of which he retains in the thickened, hard, dry skin of his hands, and in constantly-recurring sores about the body. There was a history of otorrhœa; but since being under me he has never had purulent discharge, but the ears are filled with a dirty-looking semi-liquid cerumen, which, when washed away, is shown to hide tympanal membranes with cicatrices as though perforations had existed.

The deafness is worst in a noise, and best after being in open air. His hearing, on first coming, was about 4 in. on *right*, and 1 in. on the *left* side, and until last January, when I put him upon Calendula off., it had varied but very little.

It occurred to me to try Calendula, and for this reason—Calendula as well as Saffron have been used from the time of Culpepper* as "expulsive remedies." Both these are used now-a-days by the herbalists for developing eruptions when suppressed in the exanthemata. Now I had given this man Lobelia with more benefit than any other remedy upon this metastatic principle, but it did not cure him, and naturally I asked myself if Calendula might have an effect such as the herbalists claim for it. Five drops of Calendula ♄ to go over two weeks, well diluted with water, and four drops of the same to ʒij of Sacch. lact., a grain to be used three times

---

* *English Physician*. Printed by John Streater, 1666. By Rich. Culpepper, Gent., Student in Physic and Astrology. Under Marigolds, p. 154, we are told it is "an herb of the sun," and under Leo, "they strengthen the heart exceedingly, and are very expulsive and little less effectual in the small-pox and measles than saffron."

a day as snuff, was my prescription. The effect was unquestionable; steady and continued improvement at once set in, both in his general health and in his deafness, and he has gone on with it in varying dilutions up to the present time. On beginning with it the hearing was, *right* 5 in., *left* 2½ in.; now, *right* is 7 in., *left* 20 in.

All I wish to commit myself to in this case is the enormous benefit this man derived from Calendula; as to the theory which suggested it I have no opinion to offer.

Calendula is of great use in the local treatment of ulcerating and eczematous surfaces, and, it may be, that it effected a change in the epithelial lining of the naso-pharynx, the influence extending to the middle ear.

Beyond the presence of dermic thickening of the dorsæ of the hands, and a disposition to sores on the body, this case gives us no presumable indication.

But there was then attending another very similar case in a girl of 21, where Calendula exercised an equally beneficial effect, and in which the indication seemed plain enough: "A great disposition to take cold, especially in damp weather.

Since then I have had an opportunity of putting very fully to the test of practical experience this key-note, and am well satisfied that we know of no remedy which can be resorted to for this particular symptom with such certainty as Calendula.

In one very obstinate case, in a clergyman of about 33 years of age, where only the left ear was deaf, and where everything had been tried without success, the Calendula brought back the hearing in a few days. In this case the deafness had come on after bathing; both membranes were normal in appearance, there was no discharge whatever, and there was an inability to distinguish with the left ear from whence sounds were coming, and which was always worse in damp weather. It had existed three years, during one year of which I had used every possible means without any real benefit until Calendula officinalis ℥ 7 drops to ʒij. of Sacch. lact. was given as a snuff. If a solitary case could be a crucial test of the powers of a drug, this would be, for in no way can the action of Calendula be explained except on the principle of specificity. Other medicated snuffs had proved useless.

The next case shows very plainly the action of Calendula and of Calcarea phos. A girl of 17 consulted me 14th October this year. Always dull of hearing, very much worse last three months from being exposed to draft in church. Was very deaf as a child "from her throat," but yielded to treatment.

Right ear: deaf since scarlet fever, fifteen years; watch-hearing, 15 inches.

Left ear: deaf three months; watch-hearing, 4 inches. Glairy hyaline discharge from both ears.

Hears best in a train or busy thoroughfare.

Hearing is worse when she takes cold, which she always does in damp weather; worse when fatigued.

Cannot hear two persons speaking together. Hears church-bells and distant sounds fairly.

Has never been strong, liverish, appetite fair, bowels regular, sleeps heavily, not subject to cough, catamenia regular.

Prescription.—Calendula 3x, 7 drops to go over a fortnight, and a grain of 3x trit. to be taken as snuff thrice daily.

October 27th.—Has been hearing very much better; the snuff restores hearing in an hour or two after each insufflation. Watch-hearing, right 13 in., left 15 in. Glairy discharge continues. To continue.

November 11th.—In every way better; heard in church for first time for four months. R. 30 in., L. 40 in.

Prescription.—Calcarea phos., 1x, 3 grs. dry on tongue three times a day.

November 25th.—Not hearing so well, but Calcarea phosphorica, she states unasked, acts upon the tonsils and enables her to swallow easier, the fluids of mouth do not hang about the throat as used to be the case. General health better. Watch-hearing better—right 50 in., left 45 in.

Prescription.—To have Calendula off. 3x as snuff, and Calcarea phos. 1x.

The case is still under treatment, but enough is shown by it to prove the effect of Calendula.

It will be thought, perhaps, I am robbing Dulcamara of its reputation. I do not think so; but, any way, what concerns me at present is not Dulcamara but Calendula.

What I claim to have done this evening is simply to have shown that there are good grounds for supposing Calendula to be particularly useful in the treatment of certain varieties of deafness, namely, those where the deafness is worse in damp surroundings, and especially where eczematous conditions are present.

It will be said that Calendula is imperfectly proved; this, certainly, is a reason for proving it but none for withholding clinical observations regarding it. The point is this: We have many ear-remedies, amongst the principal of which are Aconite nap., Pulsatilla, Hydrastis, Ferr. pic., and Quinine; not one of these meets the symptoms for which I have found Calendula so useful, and as this symptom is a very frequent one, the addition of Calendula to our ear-remedies is a decided gain.

There are many people who are constantly taking cold in damp

weather; they require something to counteract this tendency, and, as a help to their ears, we cannot do better than to advise the sniffing up of a grain of the third dec. trit. of Calendula off., the fresh plant being used in its preparation; while as far as the state of system generally goes, it ought to prove useful, as there are few remedies which produce symptoms like those arising from damp and chill more obviously than Calendula.

Lastly: what position is Calendula to occupy among ear-remedies? It is, of course, too soon to express a definite opinion; but it is not too soon to say that, without excepting even Hydrastis canad., and which was first brought into prominence as an ear-remedy by myself in this hospital, I have never handled a remedy with greater satisfaction than Calendula in the treatment of the moist catarrhal manifestations of Vascular Deafness.

Unproved Remedies.—Dr. Dudgeon, in the *Homœopathic World*, relates the following interesting cases, in which *Syzygium* and *Thlaspi bursa pastoris* were used successfully:

"Dr. G., æt. 56, came to me on the 5th of September of this year. He complained of what he called 'prickly heat' all over the upper part of his body and arms. The skin was covered with small red papules, which he said itched so intensely he could get no rest. He felt very weak, which might be owing to his having for the last week abstained from all animal food, and confined himself to bread, farinaceous food, vegetables and fruit. He complained of much thirst and a great flow of urine. His mouth is very dry, and he must pass water every two hours day and night. The urine which I examined had a specific gravity of 1036, and was very saccharine. I told him to take chiefly animal food and green vegetables, and very little bread and no sugar. I gave him a phial of tincture Syzygium mixed with three times the quantity of alcohol, and directed him to take two drops every three hours. September 17th.—He had taken the specific gravity of his urine every day, and found that it sometimes reached 1045, but had steadily declined for the last few days. It was now 1030. His thirst was less, the prickling itching much relieved, and the quantity of urine passed very much diminished. Continued medicine. 29th.—No thirst, no itching, passes very little urine—specific gravity 1025; he told me it had even been much lower. No sugar. His strength and spirits excellent. I told him to continue the Syzygium, once a day for a short time to confirm the cure.

"This is the most striking cure of diabetes I have yet seen by any treatment. I cannot say with preciseness how long the disease had lasted before the patient visited me. It is always very difficult—generally impossible—to fix the date when diabetes began. It is

generally pretty far advanced before the patient thinks it necessary to seek advice. Dr. G. was chiefly concerned about the tiresome pruritus, which deprived him of rest. He noticed that his mouth was dry and that his thirst was great, but he ascribed this to febrile irritation from the incessant torture of the itching. Though not a medical doctor, he has a very fair knowledge of physic, and when I announced to him, after examination of the urine, that he had diabetes, he was very much alarmed. The diet he had been pursuing was of course the worst possible for his disease, but he adopted it with the view of allaying the intolerable itching, on which, however, it had no effect—indeed, the itching grew worse every day, and was the cause of his coming to me. He watched his symptoms with intelligence, and carefully tested the specific gravity of the urine from day to day. I was not very strict in my dietetic rules, only enjoining on him to eat as much meat as he felt inclined for, to abstain from sugar, and to take toast and biscuit in place of bread and potatoes. As the diabetic symptoms declined, I removed my embargo on sugar and starch, so that, in fact, diet had nothing to do with his cure, which was apparently solely due to the Syzygium. I had already had some experience of the power of this medicine in several cases of diabetes, but none to such a degree as in this case. This may have been owing to the other cases not having been of quite the same character as this one, or perhaps to my not having relied on it alone for the cure. Of course, I know that Syzygium will not cure all cases of diabetes, for that is a disease that seems to be owing to many different morbid states; but my success in this case should be an encouragement to others to give it a fair trial in similar cases. The mere diminution in the quantity of sugar excreted by means of a rigorous anti-diabetic diet, cannot be considered as a cure of diabetes, for the sugar, as a rule, returns as soon as the patient resumes ordinary diet. By the way, the cures said to have been effected by Opium, are illustrations of the homœopathic-therapeutic rule, for Levinstein has shown in his work, *Die Morphiumsucht*, that acute poisoning by morphia causes sugar to appear in the urine of man and animals."

"*Thlaspi Bursa Pastoris for Excessive Uric Acid.*—I have elsewhere mentioned the power of this substance to affect the secretion of uric acid,* and since then I have seen several cases corroborative of its medicinal virtues in this direction. One, a gentleman, æt. 57, who, in addition to other dyspeptic symptoms, had occasionally large discharges of coarse uric acid, coming away in masses the size of a good big pin's head, but curiously enough without pain. I prescribed Thlaspi, which he said soon stopped, the uric acid. Nearly a year

---

* See *Monthly Homœopathic Review*, xxxii., p. 614.

after this he called on me for a different affection, and informed me that the uric acid had reappeared several times in his urine, but that a few doses of Thlaspi 1 soon stopped it, and it never came to the height it attained when I first gave it to him. A lady, nearly eighty years of age, was suffering from the pressure of a calculus in the left ureter, which I knew to be of uric acid, as she had previously passed much 'sand.' The urine showed no sand, and was very scanty. I tried several remedies, among the rest the Boro-citrate of magnesia, but it was not till I gave Thlaspi 1 that a great discharge of coarse brick-colored sand took place, with speedy relief to her pain. At the same time, indeed, I made her drink copiously of distilled water which has a powerfully disintegrating effect on uric acid sometimes, but, as she had already been taking this for several days without effect, I am inclined to give the whole credit of the cure to Thlaspi.

"It is not alone in such cases that Thlaspi is useful. Its ancient use as a hæmostatic has been confirmed in modern times and in my own experience, and my friend, Dr. Harper, related to me lately a most interesting cure he had effected by its means of a very prolonged and serious affection. The case was that of an elderly lady who for years had suffered from a large discharge of muco-pus, sometimes mixed with blood, sometimes apparently nearly all blood, which poured from the bowels after each evacuation. She had been many months under the medical treatment of the late Dr. D. Wilson, who at last told her he considered her disease incurable. She then put herself under the treatment of a practitioner who relies chiefly on oxygen gas for his cures; but she was no better—rather worse—after his treatment. She then came to Dr. Harper, who worked away at her with all the ordinary remedies without doing a bit of good. At last he bethought him of Thlaspi, led thereto by my remarks on its anti-hæmorrhagic properties in my "therapeutic notes" in *The Monthly Homœopathic Review* of October, 1888, and he found that, from the time she commenced using this remedy, the discharge from the bowels gradually declined and ultimately ceased, and there has been no return of it.

"No doubt Thlaspi is a great remedy, and until it is satisfactorily proved, we may employ it with advantage in cases similar to those I have mentioned. But it is to be hoped that some of our colleagues endowed with youth, health and zeal, will ere long favor us with a good proving of it, whereby its curative powers may be precisionized. At present we only partially know these from the less satisfactory results of clinical experience.

"**Lycopus virginicus** seems to be a specific for bringing back an old (but long disappeared) hæmorrhoidal flux in persons with light

eyes. I gave, a week ago, the first decimal dilution to a gentleman (sixty years) for noise and throbbing in the head during the night (which prevented the quietness of sleep); because neither Cactus (which helped quickly when he had blood-spitting) nor Kalmia, nor Gelsemium helped radically. The night after taking Lycopus, he was a little better, and in the forenoon came a bleeding from the rectum (about three tablespoonfuls after defecation) with great general relief. There was chronic catarrhus bronchialis. Two days afterwards, I gave to an elderly lady (sixty years), who had glycosuria, cataract of the left eye, and every third night was very restless, Lycopus virginicus 1 decimal dilution, one drop in the evening. The following night was excellent, and in the morning came an abundant bleeding from the rectum, with great relief. Both patients are tall, very irritable, have weak innervation of the heart, without decided organic disease of the heart; both are hypochondriacs; have light eyes; noise in the left ear. Both had, years ago, hæmorrhoidal flux, which stopped suddenly."—Dr. Proell, in *Homœopathic World.*

MERAN, October 21, 1889.

Apocynum Cannab.—" Mrs. J. F., aged twenty-one years, living at Vilaseca, married, of good constitution, appeared at my office, January 4, 1889, together with her young and affectionate husband, justly alarmed by the grave prognostications of several doctors who had examined her for a complaint from which she had suffered for seven months before. It had arrived at such an extreme that she had been advised to go to Barcelona to be operated on, and before undergoing the operation to confess herself and make her will.

"Such advice to a young and happy woman was not cheering.

" As a last resort, she determined to try homœopathy, and but a few days passed before she repented of not having done so from the first day.

" Let us examine the symptoms of this patient.

" Of apparently good exterior appearance, all excepting a paleness of face, and slight lividness of the lips, indicated her sufferings. The abdomen was much swollen, having the appearance of a woman in the last stages of pregnancy. Of this she complained. I examined her at once, and discovered a large quantity of fluid in the abdomen, which was of globular form, more prominent above the umbilical and epigastric regions. On slight percussion the fluxion was noticeable; the slight pain was increased by the weighty feeling. The respiration impaired as a result of mechanical distension, it was rather dyspnœa, compelling the patient to seek a semi-recumbent position. There were frequent, although not continuous,

palpitations, some vomiting and impaired digestion, and the tendency to lipoma constituted the general condition of our patient. Let us add, menstruation normal, the menstrual hæmorrhage appearing several days before the regular time. No cause could be attributed for this, as she had not taken cold, suppressed any perspiration, or exposed herself to any dampness.

"Diagnosis: Ordinary dropsy. I gave one dose of Sulphur, then six of Apocyn. cannab. 3 to dissolve in eight spoonfuls of water, each containing a quarter of a drop, to be taken every three hours.

"The 26th of same month I again saw the patient. The improvement was remarkable. The abdominal effusion was diminished to about two-thirds, the only complication was a slight constipation, that was relieved by a simple enema (cold water). This was ultimately cured by some globules of Nux vom., returning to the Apocyn. cannab. in same proportions as before, and on the 15th of February she was pronounced cured. Two months later she had a relapse, but with prompt treatment it disappeared within a few days, and up to date she is well. How can a few drops of a dilution where there are no medicinal properties (according to the allopaths) overcome a case of dropsy that could not be cured, but only alleviated by operation?"—Dr. Filip Ascot de Tortosa, in *El Con. Hom.*, translated for *Homœopathic Physician.*

Nutmeg Poisoning.—Dr. Amos Sawyer reports in the New York *Medical Journal* a case of nutmeg poisoning in a child three years old. He found the little patient with a normal temperature and respiration; pulse regular, but just a little slow; all the muscles completely relaxed. An attempt to arouse him failed, his head falling in whichever way the body inclined. An examination of the pupils revealed complete dilatation. Upon inquiry, the doctor was informed that the child had, unknown to his mother, appropriated from her spice-box five large nutmegs, which he informed his little sister was his tobacco, and which by noon he had managed to consume, presumably spitting out the bulk of the spice. About 2 P.M. he complained of feeling dizzy and soon fell asleep, and they had been unable to arouse him. He had had one movement from the bowels, and had urinated twice while in this condition. There had been no delirium. He recovered consciousness as if awakening from a natural slumber, but with the greatest dislike for nutmegs, after having slept thirty consecutive hours.

Nothing New under the Sun.—Brown Séquard's famous elixir is, after all, according to one of our exchanges, but a variation of an old recipe. In an old work, entitled "Hunting with Dogs," published by Eleazar Blaze, occurs the following passage: "When you

kill a boar do not throw away the testicular glands. If you be advanced in years, these glands, dried, reduced to powder, stirred into soup made from an old rooster, and taken when fasting by yourself and wife, will have marvellous effects: children will be born to you every nine months, and you will need no other recipe to restore matters to their original condition." The recipe came originally from "Julii Cæsaris Baricelli, a Sancto Mario, doctoris medici Hortulus Genialis, Genova, 1620."

The New York *Medical Times* says that a wineglassful of vinegar will immediately "restore his faculties and powers of locomotion to a man who is helplessly intoxicated."

There is a big call for the new edition of Boericke and Dewey's *Twelve Tissue Remedies*. It is a book that will profit any physician to own.

All communications and exchanges for the editor of the RECORDER should be addressed 1011 Arch Street, Philadelphia, Pa.

After much vexatious delay Messrs. Boericke & Tafel's new *Physicians' Catalogue* has appeared.

Among the new pharmaceutic preparations is an ointment prepared by Messrs. Boericke & Tafel from Skookum Chuck salts with Lanoline base. It is designed for cases of eczema.

Subscriptions to the HOMŒOPATHIC RECORDER will be received by Messrs. Boericke & Schreck, 234 Sutter Street, San Francisco, Cal. The Pacific coast is invited to avail itself of this convenience.

Messrs. Roberts & Co., 1007 H Street, N. W., Washington, D. C., will receive subscriptions to the RECORDER; also any of Boericke & Tafel's pharmacies.

We have a number of excellent papers for the next number of the RECORDER, among them one from Dr. S. A. Jones, "On One of Our Remedies in the Rough."

Those receiving sample copies of this number are invited to send in their names and $1.00 and become subscribers. The RECORDER, we think, is worth the small sum asked.

A number of our subscribers who are in arrears will confer a favor by remitting amount due.

With a few exceptions, back numbers of the RECORDER of any year can be supplied at 20 cents each.

THE

HOMŒOPATHIC RECORDER.

VOL. V. PHILADELPHIA AND LANCASTER, MAY, 1890. NO. 3.

ONE OF OUR REMEDIES IN THE ROUGH.

I.

An observant reader of our periodical literature for the last thirty years cannot fail to note a significant change in its character, quality, and value. In our latter-day journals he will find far more of "science" and far less of art. This it is that has changed its character, impaired its quality, and lowered its value—*as homœopathic literature*. Of course, there is science and *pseudo*-science, and between these I do not care to discriminate because, in their *absolute value to Medicine as an art*, I would not give a bent pin for the choice.

I do not particularly desire to be misunderstood, but after some twenty-five years' experience as a writer I have gotten used to it—to bump against the extra-thick skull of some good-natured reader doesn't disturb my digestion at all—still, to avert misunderstanding, let me say in the words of Dr. John Brown, of Edinbro', "The word Science is used in the sense of information, as equivalent to a body of ascertained truths—as having to do with doctrines. The word Art is used in the sense of practical knowledge and applied power." The same author makes this subtle distinction: "Science * * * is lucid rather than luminous"—and whoso gets the pith and marrow of *that* will have no quarrel with me. But, as there are no pepsinoids for the aid of intellectual digestion, and as many readers decline to chew even a thought, it will be best to quote some of Dr. Brown's pithy antitheses to make clear what science and art, *in medicine*, are:

SCIENCE.	ART.
Studies the phenomena of poisoning.	Runs for the stomach-pump.
Is diagnostic.	Is therapeutic and prognostic.
Has a system.	Has a method.
Speaks.	ACTS.
Is *post-mortem*.	Is *ante-mortem!!*

The *dictum* is as old as Aristotle that "the end of life is an action, not a thought;" and that ought to knock out "Science" in the first round. Of course, it won't do this with those who are nothing if not "scientific," and *therapeutically* the same though never so scientific. But, I am counting on those matter-of-fact fellows who "run for the stomach-pump;" the wide-awake *ante-mortem* chaps, not the *post-mortem* "scientific" specimens of which the History of Medicine is a very charnel house.

I much wish that those Homœopathic physicians whose writings are making our journals but a feeble echo of those of the old school, would ransack the old-book stores until they get a copy of *Van Swieten's Commentaries on Boeshaave*. Van Swieten will command their respect as the founder of the Vienna school of medicine. On reading, they will find him to have been a man of encyclopædic attainments, a "full" man, as Bacon would say. He represents the "science" of his day—a science as satisfying to him as ours is to us; a science that puffed up its possessor just as ours does to-day. When such an one has done laughing, I wish to ask him how he knows that the physician of 1990 will not laugh at our "science" just as we do at Van Swieten's?

Now, it is a fair question to ask: if the science of medicine fluctuates from century to century, yes, from decade to decade, and if a certain exposition of the art holds its own as the same yesterday, to-day, and to-morrow, then which of the two is the better possession? One is theory; the other is practice, and at the same time demonstration. Which is the better possession?

Much of the debasement of homœopathic literature that we deprecate is owing to the younger graduates in Homœopathy. This sounds like an Irish bull, but it is not such when we remember that we have colleges which are homœopathic only in title. As the fountain cannot rise higher than its source, so a student is not apt to transcend his teachers. If they limp he will stagger in the faith. I myself have heard a (nominal) professor of homœopathic materia medica tell his class that Hahnemann and his provers were a set of eager enthusiasts and that their provings must be read with many grains of allowance—taken as a whole, they were decidedly unsafe to follow; and yet, by these very provings our school had won its laurels and its place as a school!

I wish to say—and it has taken me all this while to get round to it, such is the garrulity of advancing age—that we are forgetting our beginnings, forgetting the therapeutic protagonist whom we *can* forget only to our shame. Think of his honesty of purpose; think of his relinquishing a profession because it was only a

blind groping in the impenetrable darkness. He could not do as his fellows did: pocket his fees and ask no questions. They had a "Science and Art of Medicine" in his day, and he was legally qualified, but he could not deceive his own soul—and he wrote no more prescriptions. There was a wife and children to clothe, and feed, and keep warm, and yet he dropped practice and took up translation, Poor pay always; poorer then than now. One day while translating *Cullen*, the divine hint flashed athwart the darkness; and then began a series of labors in materia medica that none of woman born has equaled. We are to-day enjoying all that he toiled for in poverty and in obloquy, and we repay him, the Light-Bringer, by forgetting him and filling our journals with *imitations* of modern "Science!" It is well to call a halt from time to time for the sake of taking a retrospect that shall show us our actual dimensions and teach us his; and this is the more needful for those physicians, called (and calling themselves) homœopathic, that have been graduated within the last eighteen years. It is about that time back since the unacknowledged appropriation of homœopathic therapeutic literature was begun by Sidney Ringer—whose example has begotten a breed of "conveyancers" of the *Cacus* character. The practical value of these appropriations, and that other benefit derived from Homœopathy, namely, the decrease in the dosage of the older school, have made the contrast between old school and homœopathic practice infinitely less pronounced than it was in Hahnemann's day. These younger graduates are not likely to be fully aware to what degree the advance of the old school is due, directly in positive therapeutics and indirectly in diminished dosage, to the genius of Hahnemann. In Hahnemann's day the difference in results between the old method and the new gave to his early disciples a steadfastness that is conspicuously missing in the callow graduate of to-day. I do not blame the callow graduate; for the sight of a hypodermic syringe in a "Professor's" *kit* denotes an "eclipse of Faith" wherein the blind lead the blind and both "fetch up" in the ditch.

I do not at this moment think of a better plan for such a retrospect as is desiderated than to take *One of Our Remedies in the Rough* and see what it became in Hahnemann's hands. But allow me a parenthesis before I carry out that plan. Well, then, you recollect Dr. John Brown said, "Science has a system; art has a method." Now let us proceed "according to Hoyle" *and* Webster, for we want to take the trick. *System* is "a complete exhibition of essential principles or facts, arranged in a rational dependence or connection." *Method* is "an orderly procedure

or process." On these definitions we base the assertion that the therapeutics of Homœopathy combine both science and art, having both a system and a method. That its system is based on "essential principles or facts" is shown by the power of *prevision* that is found in it, and in no other system of therapeutics. This prevision consists in defining under what conditions a given remedy will produce a specially designated result in a case wherein that remedy has *never before been known to have been applied*. This prevision depends solely upon the *data* derived from a knowledge of the effects of that remedy upon the human organism in health. This knowledge is obtained by "an orderly procedure or process" into which absolutely no hypothesis enters.

We are now ready for

The Remedy in the Rough.

II.

Pulsatilla is confessedly the consummate masterpiece in the Hahnemannian Materia Medica. If he had left only that and his Orgascon it would have sufficed to establish the truth of his system, and to have shown the way out of Egypt. Here follows all that the medical world knew of Pulsatilla, or *Anemone*, down to the Year of Our Lord, 1578.

"The roote of Anemone chewed in the mouth, draweth unto itselfe flemes, and causeth muche moysture to be auoyded out of the mouth.

"The same boyled in wine prepared (called in Latine *Passum*) and after layd upon the eyes, cleareth the sight, and taketh away webbes and spottes.

"The leaves and yong branches boyled with cleane husked barley, causeth Nurses (that drinke thereof) to haue abundance of milke.

"The same put under, as a Pessaric or Mother Suppositorie, stirreth up the menstruall flowers of women."

As late as A. D. 1710, it had attained the following dimensions:

"VIII. *The Qualities.*—They are hot and dry in the third degree. They cut, inside, attenuate, attract and inflame; are dedicated to the Head, Womb and Joynts, and Alteratives only in their Operation.

"IX. *The Specifications.*—They are peculiar cold and moist Distempers of the Head, Brain and Womb, and to cleanse old Ulcers.

"X. *The Preparations.*—Tho' the shops keep nothing of this Plant, yet you may prepare therefrom, 1. *A Juice.* 2. *An Essence.* 3. *A Decoction.* 4. *A Gargarism.* 5. *A Saline Tincture.* 6. *An Oily Tincture.* 7. *An Ointment.* 8. *A Cataplasm.* 9. *A Masticatory.* 10. *A Pessary.*

The Virtues.

"XI. *The Juice.*—It is a singular good Errhine, for by snuffing it up the Nostrils, morning and evening, it Purges the Head and Brain of cold, thick and tough flegmatick Humors, whereby it prevails against Apoplexies, Epilepsies, Carus, Lethargies, Vertigos, Megrims and cold Head-aches, proceeding from a cold cause.

"XII. *The Essence.*—It has the same virtues used as an Errhine; but is most commonly given inwardly from ij. drams to half an ounce, mixed with a draught of Mead, Wine, or some proper Water, to open Obstructions of the Womb, and to bring effectually the Terms in Women, as also hasten the Birth, and bring away the After-birth. [Does that "to hasten the Birth," corroborrate the Homœopathic use of it to procure the evolution of the fœtus—as is claimed by many?]

"XIII. *The Decoction.*—It is not so hot as the former, and therefore not so strong, but yet is effectual for the same things the Essence is, but may be given in a larger Dose, as from ij. ounces to iij. sweetened with White Sugar.

"XIV. *The Gargarism.*—It is made of the Juice or Essence, mixt with an equal quantity of the Decoction, to 8 ounces, of which you may add iij. drams of pure Nitre, dissolving it therein. Used as a Gargle, it powerfully attracts cold and moist Humors out of the Head and Brain, and parts adjacent, and so it is good in the Cure of those Diseases, the Juice is said to be good against.

"XV. *The Saline Tincture.*—It more powerfully opens the Womb than the Essence does, and is used in inveterate Obstructions thereof when the Essence is not found powerful enough. It opens Obstructions of the Reins and Bladder, provokes Urin, and expells Sand and Tartarous Matter. Dose from j. dram to ij. in some fit Vehicle.

"XVI. *The Oily Tincture.*—Tho' this may be used inwardly, yet its chief Use is for External Application against Weakness and cold Affections of the Nerves, Tendons, Ligaments and Joynts; against all sorts of Aches and Pains proceeding from Cold, or an Afflux of Cold Humors, as also against Numbedness, Tremblings, Cramps, Convulsions, Palsies, and the like Disaffections of the Nerves.

"XVII. *The Ointment.*—It has the Virtues of the Oily Tincture, but not so powerful, but is better for cleansing old running Sores, fœtid Ulcers, malign and rebellious Fistula's, and taking away Scabs, Itch, Scurff, Morphew, and other like Defilements of the Skin.

"XVIII. *The Cataplasm.*—It has the Virtues of the Ointment, opens the Pores of the Skin more and prevails against Scabs, Scurff, Morphew, Leprosie, etc.

"XIX. *The Masticatory*—It has all the Virtues of the Gargarism, but is better to be used by such as cannot away with the other. It is made of the Root.

"XX. *The Pessary*—It is made either of the Root or Juice, with Wax and Barley-flower, and is put up into the Womb to bring down the Courses."

III.

The reader is now in possession of as much knowledge concerning *Pulsatilla* as was available for Hahnemann when he began his provings of this plant, if he will also include some two-dozen symptoms culled from Bergius, Hellwing, Heyer, Saur, and Stoerck. As *Pulsatilla* first came from Hahnemann's hand, in his *Fragmenta* de Viribus, *etc.*, it had 309 symptoms; in the first edition of his *Mat. Med. Pura* it had grown to 1073, and in the last we have 1154. O ye younger graduates who call yourselves "Homœopaths," in simple justice to a dead man's memory (and *such* a man!) study his pathogenesis of *Pulsatilla*, thoroughly digesting his introductory observations and his foot-notes, and making all the comparisons of sequences and alternating effects, and then say in your heart of hearts if "ever man spake as this!"

Rise up from a faithful study of this pathogenesis filled with a conception of his depth of insight and unrivalled power of observation. He has touched the dry bones of Emperical Medicine and it thrills with life. He has pointed out the secret of a drug's puissance, and what it did for him it will do for you, to-day, to-morrow, and while time shall last. Of whom before him can this be said? Of how many after him? If after such a study of *Pulsatilla* you do not find your heart filled with fealty it is more than likely that you have spoiled a third-rate shoemaker in the attempt to make a fourth-rate doctor—I don't say *Homœopath*, which means a doctor *plus* the only approximation to a Law yet discovered in Therapeutics.

Lastly, my dear young graduate, leave "science" to the poor, pin-feathered "Regulars," it is all they have, and what good does it do them or their patients! I lately saw *this* "science" prescribing quinine and whisky for the *grippe*—which means champagne and oysters for the undertakers. That is the way it worked in my vicinity. Leave *that* "science" alone; take in your hand the Hahnemannian clue and you will walk your rounds panoplied in puissance.

S. A. J.

ANN ARBOR, February 8th, 1890.

THE RECTUM.

Some of Its Diseases and Their Relation to Chronic Diseases.

Until quite recently but little has been known by the profession concerning the rectum or its diseased conditions.

Even now a majority of the physicians are ignorant concerning some diseases of the rectum, and those very diseases are the most mischievous, not from any local disturbance, but in their effects on the general system.

In order to understand the matter we must begin at the foundation and bear in mind one thing, viz: There is one agency by which our physical beings are developed and by which they are maintained, and through this agency must they be restored when broken down by disease. No matter what measures are adopted they must be directed to one thing, and that is, to promote a healthy circulation of the blood. It is well known that the circulation of the blood depends upon nerve force alone, so that whatever exhausts this nerve force tends to weaken the circulation with all the consequences incident thereto.

This nerve force is derived from the vaso-motor or sympathetic system.

The rectum, like all other tubes of the body, has a muscular coat composed of involuntary muscular fibers, and as is well known, all involuntary muscles receive their nerve supply from the vaso-motor system. The anus is guarded by two sphincters, the external receiving its supply from the cerebro-spinal system, and the internal sphincter, being an involuntary muscle, receives its supply from the vaso-motor system. Keep in mind the fact that the force controlling the circulation of the blood comes from the same source as does the internal sphincter and muscular coat of the intestines and you have the key to the situation.

The lesions of the rectum keep up a constant irritation, producing an immense waste of the vital forces and undermining the system.

Prof. Pratt makes this broad assertion: "In all pathological conditions, surgical or medical, which linger persistently in spite of all efforts at removal, from the delicate derangements of brain-substance that induce insanity, and the various forms of neurasthenia, to the great variety of morbid changes repeatedly found in the coarser structures of the body, there will invariably be found more or less irritation of the rectum, or of the orifices of the sexual system, or of both. In other words, I be-

lieve that all forms of chronic diseases have one common predisposing cause, and that cause is a nerve waste occasioned by orificial irritation at the lower openings of the body. These irritations induce a rigidity of the sphincters guarding the parts, which either continues sympathetically affecting the rest of the involuntary muscular system, and steadily draining the nervous power that supplies it, until the whole struggle terminates in a rigor mortis; or, tiring out in the hopeless grip, relaxes into the inertia of paralysis."

While this seems almost incredible at first, a thorough investigation will lead almost anyone to believe the statement.

The lesions of the rectum may very properly be divided into two classes.

1st. Those of which the patient is conscious; and, 2d. Those of which the patient is unconscious, because of the lack of local disturbances.

It is this latter class which produce the most serious results.

In the first class belong hemorrhoid or piles, fistula, fissure and ulcers.

Our books contain full instructions for the treatment of these troubles, and the reader is respectfully referred to them. In the second class belong pockets and papillæ. No mention of them is made in current literature, and until recently not even has the subject been metioned in our medical colleges.

What are rectal pockets?

They may be present as long sacs, ulcerated at the bottom, or short pouches, with broad mouths, but whenever present they always produce irritation of the rectum and should be removed. There is a division of opinion as to whether they belong to the domain of anatomy or pathology, for they are by no means always present. There is only one way to determine positively whether they are present or not. Two things are needful, a blunt hook and a good rectal speculum, preferably a bivalve or trivalve speculum. Care is necessary, even then, or they may be overlooked by opening the speculum too much, thereby stretching the mucous membrane so much as to close the mouth of the pockets, and the hook will then glide over the surface without becoming engaged.

Very many of the internal, incomplete fistulæ, which have been treated by physicians in the past, were doubtless rectal pockets which had become ulcerated. Having become ulcerated it is only a question of time when they will develop into complete fistula. Papillæ are conical processes of mucous membrane, varying in size and location. When small, and transparent at

their apices, they seem to occasion the most trouble. Each is provided with a central artery, which bleeds viciously when cut off. The bleeding is of short duration and does no harm. In the treatment of pockets and papillæ there is only one course to pursue, and that is to remove them, Engage the pockets with the blunt hook and cut them out, using a double curved scissor for the work. Papillæ can be taken up with a tenaculum and cut off.

In all cases, after removing the pockets or papillæ, stretch the sphincters thoroughly, to give the parts rest. The effect of this treatment on some of these old chronic cases is marvelous. You ask how? Close the hand tightly and keep it clinched for one hour, never relaxing the muscles for an instant; and observe the amount of vital force that is required to do so.

The presence of pockets and papillæ in the rectum produce an irritation which causes the muscles to remain in a state of tonic contraction, day after day, week in and week out, continuing sometimes for years. Consider for a moment what an enormous waste of nerve force is constantly going on. Is it any wonder that "the whole struggle terminates in a rigor mortis; or, tiring out in the hopeless grip, relaxes into the inertia of paralysis."

The circulation of the blood, being dependent on this force, naturally becomes weak, and almost every organ and tissue in the body suffers.

The various organs become torpid; the liver is inactive; the stomach fails to digest the food; the bowels become constipated; the heart palpitates; the mind is diseased with the body; and the victim becomes an easy prey to almost any disease flesh is heir to. Hysteria, epilepsy, impotence, consumption, insanity, and in fact, every type of chronic disease.

Almost any physician can call to mind some case of impaired health where it has not been easy to discover any cause for disease. In such a case don't fail to make a thorough examination of the rectum. Remove every source of irritation and in a majority of cases the patient will be restored to health.

In the last number of the RECORDER some one mentions the painless treatment by injection "conceived while lost in the depths of Dante's Inferno." Now there are *some cases* of piles that cannot be injected without causing severe pain, external piles in particular or any other pile tumor which is of a fibrous nature or when badly inflamed. Cases of vascular tumors can be injected without causing the patient any discomfort. Care must be used so as to pass the needle *into* the tumor, and not *under* it.

That suppositories will relieve many cases I have no doubt, but that *all* cases will yield, I have doubts, and think that eventually they will have to be removed with the knife or by injection.

SOLON ABBOTT, M. D.

Biddeford, Me.

ON THE THERAPEUTICS OF THE PASSION FLOWER.

Passiflora Incarnata.*

This is one of the many species of the Passion Flower; and is at the same time the most showy of the various species found in the United States.

It is a climbing herbaceous plant and has its habitat over a wide area—including Europe, Asia, Australia and America. Its gaudy flowers are doubtless to be seen in the "Dark Continent" also. Even in Maryland we are not strangers to this plant. Whilst it flourishes in the "Sunny South," it wanders as far north as Pennsylvania and Illinois.

Thus scattered over the four quarters of the globe, it ought to be an herb of some importance to the human family; but so far as the writer is aware there has never been a proving made of this plant, and we are therefore left to the empirical method of gaining some knowledge of its properties and uses.

Hale, in his "New Remedies," quotes an article upon the plant extolling its viritues as an unrivalled remedy for Tetanus Neonatorum, neuralgias of all sorts, chancre, ulcers, syphilis, erysipelas, etc.

As to dose, it may be taken *ad libitum*, Dr. Lindsay declaring in the article referred to, that it is not narcotic but a most delightful hypnotic.

With a somewhat rare drug and one whose character shone forth with such radiance, is it any wonder that I was attracted to it and sought out opportunity to put it to trial and note results?

Trusting to Dr. Lindsay as to its non-poisonous property, I resolved to try its hypnotic power on myself.

First night I took ten drops of the tincture and retired to sleep, the sleep that knows no waking—*till the morning*. Alas, I was disappointed for I waked often by reason of hotel guests coming at unseasonable hours. Still I thought my eyelids felt heavier

---

*Read before the Homœopathic Medical Society of Delaware and Peninsula, at its meeting, November 14, 1889.

than usual and that I fell asleep easier. On the second night I took fifteen drops but without results of special significance. On third night I imbibed to the extent of twenty drops. Although I was awaked several times during the night, I cannot doubt the hypnotic power of the dose, and believe that under favorable circumstances the trial would have given the most satisfactory results.

In this way, I should probably have continued to experiment on myself, had nature or art—or any other man or *woman*—for that matter, brought about the "fitness of things:" but as there existed neither chancre, Syphilis, nor tetánus neonatorum, I cannot give you, gentlemen, further experience of the action of this admirable drug upon my own person. I take pleasure, however, in testifying to its merits in the two following cases—the one erysipelas, the other chorea. My erysipelatous case was a man of some 50 years.

When first seen was a-bed, high fever, facial erysipelas of the flaming, rampant sort, the one eye had disappeared, the other was in rapid retreat. Patient in great anxiety; sharp, stinging pains; could not rest. Was about to give Apis when I thought of my Passion Flower.

Gave two-drop doses of the tincture every two hours. Put one-half an ounce of same into one quart of water for local application, to be aplied hot by flpannels and oiled silk.

After six hours patient fell asleep; was awakened for medicine every three hours during the night; went to sleep easily after each dose. Said in morning he had had a night's good rest. Found inflammation markedly reduced. I now changed the remedy—gave *Ham.*, both internally and externally. On next visit found patient every way worse. The disease had sneaked across the scalp and invaded the whole face. The case began to look serious. Returned to the Passiflora and kept to it with the most happy results.

My next experience was in a Chorea—a girl budding into womanhood, but in whom the menses had not yet appeared. Child was well developed for her years—14. I learned that for two or three years past the child had "fits," varying at times from moderate to severe.

The neurosis was unilateral, the right side alone being affected. The child had had traditional treatment, "off and on," for some time without manifest improvement.

I began with the Passiflora lx. dil., 10 gtt. doses every three hours. Kept it up for several days, the Choreic symptoms being not quite so violent; still I was growing anxious—wanted more

positive results. Added daily a five-drop dose of tincture. After a few days more the mother informed me that there had been a slight "show"—merely enough to stain the diaper, and that for the last two days there had been hardly any "fits." This was encouraging. I judged that the day of deliverance was nigh. Very little more of the drug was given until about the time for next menstrual flux. Then I resumed it with the most satisfactory results. No nervous symptoms save such as are more or less common to all women at the "periods" subsequently prevailed.

From an individual case too strong an inference must not be drawn; yet I think it is legitimate to conclude that the Passion Flower exerts a decided action not only over neuroses, but also over the female generative organs. I recommend this admirable drug to the kind consideration of members of this society and hope *some* may be induced to give it further trial and report. The foregoing experience has given me much confidence in the drug.

W. D. TROY, M. D.
CENTREVILLE, Md.

SCINTILLATIONS FROM OHIO.

A copy of the "Proceedings of the 25th Annual Session of the Homœopathic Medical Society," of Ohio, is acknowledged by the RECORDER. The meeting was held at Cincinnati, last May.

Dr. C. E. Walton, of Cincinnati: "The more Allopathy he [the Hom. physician] knows the better a Homœopath he is, and the more of Homœopathy he knows the less of Allopathy he will practice."

Dr. Allen, of the Bureau of Materia Medica said: "Out of forty-six provers engaged this last year on a drug, I have four partial reports."

Dr. O. A. Palmer, of Warren, speaking of asylums for the insane: "I never want myself or them [his friends] sent to an insane asylum with inexperienced men in charge; nor to an asylum treating allopathically; their mode of treatment is disgusting. The idea is that they must give something to quiet the patient, to deaden instead of correcting the wrong impression under which the patient is laboring. If there is any place on earth where ability is needed, it is an insane asylum."

Dr. R. D. Tipple, of Toledo: "When we consume water from

city wells, filthy rivers, and last but not least, water from old, slimy, muddy and filthy charcoal and gravel filters, the system soon clogs up with poison, and the germs of disease." He very strongly commended the porous stone filter which is so easily cleaned.

J. C. Fahnestock, of Piqua, treated of natural gas, when used in stoves and furnaces, "being a radiated heat, you can easily see that the oxygen of the air in the room is rapidly used up and the air thus heated becomes intensely dry and vitiated," and in many people causes "dizziness, pressure on top of the head, a dull headache continually, pressure across the lungs, and as some have told me, like a band tied around the chest;" also cases of sore throat. There is sulphur present, the doctor claims. "I have fully come to the conclusion that the only true way to use natural gas as a fuel is in a grate, with plenty of fresh air admitted into the room, also a free use of water near the fire, in order to keep the air moist."

Dr. E. R. Eggleston, of Mt. Vernon, inclines to the opinion that the day of the microbe is closing. "The drift of opinion sets very decidedly against the germ theory, and toward the wider range of causes precedent, leaving the germs as a later and less important element."

Dr. H. C. Allen, of Ann Arbor, Mich: "When Dr. Gann reported to me that a patient of his had discontinued the drug [*magnesia phos.*] because he believed that it had produced an attack of bilious fever, I wrote for particulars of that bilious fever. It was a peculiar coincidence that four of my provers had to stop the proving because of attacks of bilious fever between the fourth and fifth days; that is why I wanted a report of this from beginning to end. I have no doubt that this patient's attack of bilious fever was the result of magnesia phos., from the coincidence of the three others of a similar character occurring about the same time of the proving. One of my provers wrote me that she had used the drug in nearly every case of dysmenorrhœa in the dispensary and with almost uniform success, but couldn't give me a symptom."

Dr. Baldwin, of Portland, Ore.: "I use it [*mag. phos.*] in cases of dysmenorrhœa that I formerly treated with Ignatia, Pulsatilla, or Gelsemium, and I have had most satisfactory results with it." "I have invariably used it in the sixth trituration."

Dr. Webster, of Dayton: "I have been watching this matter [post-scarlatinal nephritis] for many years, and think I have never had a case of nephritis after desquamation is completed, but it is always during the process of desquamation. As the

skin is covered with a cuticle just like varnish, the kidneys are called upon to perform extra duty. The best remedy I have yet found is Apis. I never resort to bathing. I keep the patient quarantined and give this remedy. We had an epidemic in our city, and my cases have all passed off without this trouble." Dr. Beebe: "The last five years I have never failed to produce a sweat every night for a week, beginning as soon as the fever leaves. Since following this course I have failed to have a case of scarlatinal dropsy. . . . . Give the patients plenty of cold water to drink."

Dr. Lovett, of Eaton: "One great thing in preparing infant food is to use milk sugar for sweetening. It is a great error to use cane sugar. I have found that if you take pure milk, whether from one cow or many, and sweeten it with sugar of milk, you will avoid this frequent indigestion with which little children are bothered. The prepared infant foods are many of them good and they have their place; but we resort to them too quickly."

Dr. Duncan, of Chicago, speaking of the allopathic flood of "small sugar-coated pills, sugar pills, compressed tablets," etc.: "Nothing is so emphatically homœopathic as any of our pills below No. 30. I believe we should keep up our distinctive form of administering medicine. More than that, we should educate the people that it is something more than the form of the medicine."

Dr. Allen: "Individualization is going to make it [*passifloro incarnata*], by and by, a very fine remedy."

Dr. Allen: "Now I perfectly agree with my eastern brethren that malandrinum is not only a better preventive than vaccination, but that it is much safer, and if a case of smallpox had occurred, that it would probably be the best remedy known." [Cases were related where vaccination would not "take" when malandrinum had been previously administered.]

Dr. Palmer, of Warren: "I have come to believe that alcohol is no stimulant, but rather a narcotic poison."

Dr. Beckwith: "My friend [alluding to Dr. Palmer] knows more than Carpenter, who says that alcohol is a food. He is progressing very rapidly. The oldest man on record to-day alive is the man who took wine three times a day all his life long. Some years ago my brother and myself had charge of all the railroad surgery in our place. The first symptom in most all of the cases would be a chill, which a few drops of whisky invariably dispelled and recruited the sufferer. We found that we could bring our patients into better condition by the use of

alcohol. There may be something better than alcohol. But I know perfectly certain that my brother was as successful in railroad surgery as they are to-day."

Dr. Reed: "And I also find that Grauvogel says that after he began the use of arnica in or after confinement he never had a case of puerperal fever to deal with. This harmonizes with my own experience with the use of this drug. * * * It is now more than five years since I have had a case of this kind to develop in my practice."

Dr. Owens: "I never use antiseptics and I have not had a case of puerperal fever in twenty-five years. I never give any medicine after confinement except it is indicated, I give arnica for the soreness and bruised feeling."

Dr. Baldwin, Cleveland: "About a year ago, I read, if my memory serves me correctly, in the *Medical Era*, the statement that during gestation the mother's pulse is the same whether she be sitting, reclining, or standing. Since then I have carefully applied this test * * * and I am about ready to place it second only in value to the fœtal heart-beat."

Dr. Ferris, (anent the "dry-heat" discussion): "I was born and raised in the Eclectic Institute, and they talk more Homœopathy there than has been talked here to-day. * * * This kind of business is like hunting after the flesh-pots of the Allopaths. You are not studying Homœopathy."

Dr. Beckwith: "You don't find any better success in the practice of to-day from what it was forty years ago, when the Homœopathic remedy was strictly adhered to."

Dr. Ferris: "I have always believed that the indicated Homœopathic remedy was all-sufficient * * * just as long as you go hunting for palliatives you are introducing that which will spoil your case and make your work nil."

THE SPARE HOUR.—No. 3.

[There is evidence, satisfying to historical critics, that in the following *maxims* we have some crystallized experience—commonly called wisdom—gathered during twelve centuries, i. e., from the 6th to the 18th of our era. In the original these maxims have a point and a pith that any translation wholly fails to render. If any reader doubts this, one sample may convince him. What does he say to this: "*Udgorn angau yw peswch sych.*" The words *peswch sych* are a terrible throatful for any

but a Welshman. The Welsh sounds for *ch* and *ll* defy verbal description, and when heard cannot be reproduced by a foreigner so that he shall not be detected as an alien; and yet, by means of the sounds of its single and double consonants, the Welsh language is phonographic; any one once learning its alphabet can correctly spell any word from its sound.

The maxim cited above in the original is the last one of this list, and translated idiomatically is: *Trumpet death is cough dry.*]

MEDICAL MAXIMS.

From the Book of Iago ap Dewi, an Ancient Welsh MS.

1. He who goes to bed supperless will have no need of Rhiwallon of Myddvai.*

2. A supper of apples—breakfast of nuts.

3. A cold mouth and warm feet will live long.

4. To the fish market in the morning, to the butcher's shop in the afternoon.

5. Cold water and warm bread will make an unhealthy stomach.

6. The three qualities of water: it will produce no sickness, no debt and no widowhood.

7. To eat eggs without salt will bring on sickness.

8. It is no insult to deprive an old man of his supper.

9. An eel in a pie, lampreys in salt.

10. An ague or fever at the fall of the leaf is always of long continuance, or else is fatal.

11. A kid a month old—a lamb three months.

12. Dry feet, moist tongue.

13. A salmon and sermon in Lent.

14. Supper will kill more than ever were cured by the Physicians of Myddvai.

15. A light dinner, a less supper, sound sleep, long life.

16. Do not wish for milk after fish.

17. To sleep much is the health of youth, the sickness of old age.

18. Long health in youth will shorten life.

19. It is more wholesome to smell warm bread than to eat it.

20. A short sickness for the body, and short frost for the earth, will heal; either of them long will destroy.

21. Whilst the urine is clear let the physician beg.

---

*Rhiwallon was the progenitor of a line of distinguished physicians reaching from the 13th century to A. D. 1845, when the last lineal descendent died in the 85th year of his age.

22. Better is appetite than gluttony.

23. Enough of bread, little of drink.

24. The bread of yesterday, the meat of to-day, and the wine of last year will produce health.

25. Quench thy thirst where the washerwoman goes for water.

26. Three men that are long-lived: the ploughman of dry land, a mountain dairyman, and a fisherman of the sea.

27. The three feasts of health: milk, bread and salt.

28. The three medicines of the Physicians of Myddvai: water, honey, and labor.

30. Moderate exercise is health.

31. Three moderations will produce long life; in food, labor, and meditation.

32. Whoso breaks not his fast in May, let him consider himself with the dead.

33. He who sees fennel and gathers it not, is not a man, but a devil.

34. If thou desirest to die, eat cabbage in August.

35. Whatever quantity thou eatest drink thrice.

36. God will send food to washed hands.

37. Drink water like an ox, and wine like a king.

38. One egg is economy, two is gentility, three is greediness, and the fourth is wastefulness.

39. If persons knew how good a hen is in January, none would be left on the roost.

40. The cheese of sheep, the milk of goats, and the butter of cows are the best.

41. The three victuals of health: honey, butter, and milk.

42. The three victuals of sickness: flesh meat, ale, and vinegar.

43. Take not thy coat off before Ascension day.

44. If thou wilt become unwell, wash thy head and go to sleep.

45. In pottage without herbs there is neither goodness, nor nourishment.

46. If thou wilt die, eat roast mutton, and sleep soon after it.

47. If thou wilt eat a bad thing, eat roast hare.

48. Mustard after food.

49. He who cleans his teeth with the point of his knife, may soon clean them with the haft.

50. A dry cough is the trumpet of death.

In the original the maxims are not numbered; they are appended here for my own convenience in regard to certain comments I would make on the text.

2. It will surprise the reader that apples should be advised for

"supper," remembering that fruit is "lead at night" tho' gold in the morning; but in this instance the maxim is based on the choice of the lesser evil. The nuts referred to in the text are the hazlenut, walnut, and chestnut, and Dr. Thomas Cogan's *Haven of Health*, *anno* 1596, will tell us how these ranked as articles of food: "Hasil Nuts bee hoot and drie in the first degree, they be harde of digestion, they fill the stomacke and bellie with winde, they encline one to vomite, and as experience prooueth, they stuffe the breast full of flewme and cause a cough." He advises against eating many of them, especially if they are dry—the dry being worse "because they are drie and oylie, by reason whereof they turne soone to choler and engender headache." He advises eating them after fish, "because nuts by reason of their drinesse let [hinder] the ingendering of flewme that is woont too come of fishe."

He is substantiated by the learned Thos. Venner, M. D., who published his *Via Recta at Vitam Longam* in 1650, who says: "The common hedge, or Hasellnuts, especially if they be dry, are of an earthy and unprofitable substance; they are hard of concoction; and because they very slowly pass thorow the belly, they are troublesome and hurtful to the stomach. * * * They are only convenient for rusticall bodies."

Dr. V. also says: "The Walnuts are only good for robustious bodies, and such as respect not wherewith they fill themselves."

According to Galen the chestnut is, of all, the most nourishing, yet for all that, writes Venner, they are not approved for meat, except in time of penury, or for strong, rusticall bodies," because they "abundantly ingender winde, bind the belly, and offend the head."

Alas, there was also another nut—eaten from the penury of nature in those early days—the acorn. It was roasted under ashes, and eaten, and was of so binding a property that it was successfully used to stay the lask [dysentery].

Of such diet, one can understand why it was best managed by a vigorous, "robustious" morning digestion.

33. What is this "fennel" that it should be so highly prized? Its virtues are given in the old Welsh MS. as follows: "The fennel is warm and dry in the second degree, and is useful for diseases of the eye. It is good for every kind of poison in a man's body, being drunk in the form of powder mixed with white wine or strong old mead. It is useful for tertain ague, and inflammatory fever; and if the seed or herb is boiled in water, till it is strong of the virtue of the herb, and the head, when subject to the headache, washed therewith, it will greatly

benefit and cure the same when the headache is occasioned by cold or fever. It will remove the headache very quickly." Surely, the early Britons were exceedingly thankful for small therapeutic favors.

39. Our colored brethren have discovered the January virtue of the hen, and they depopulate the roost accordingly, but all this in time of penury.

Dr. Thomas Cogan, *anno* 1596, writeth: "Hennes in winter are almost equall to the Capon, but they do not make so strong nourishment. The flesh of them is without superfluitie, as Haly and Mesues write, and is soone turned into bloud. And they have a marveilous propertie to tempere mans complexion, and humours, and their broth is the best medicine that can be for Leapers (Lepers). And Auicen (Avicenna) affirmeth that the flesh of young Hennes augmenteth understanding, and cleareth the voice, and encreaseth the seede of generation. That Henne is best which as yet has never layed Egge. And a fat Henne full of Egges is not the woorst. The poet Horace in the person of the Epicure setteth foorth a way to make a Henne tender upon the sodaine in this wise:

"'If guestes come at thee unawares, in water mixt with wine,
Souce thou thy Henne, she will become short, tender, nesh and fine.'"

"That ever Famous Thomas Muffett, Doctor in Physick," says in his *Healths Improvement*, edition of 1655: "Hens are best before they have ever laid, and yet are full of eggs; they are also best in *January*, and cold months, because long rest and sleep in the long nights makes them the fattest. Their flesh is very temperate (whilst they are young) of good juice, and large nourishment, strengthening natural heat, engendering good blood, sharpening a dull appetite, quickening the eyesight, nourishing the brain and seed, and agreeing with all ages and complexions; for they are neither so hot as to turn into choler, nor so cold as to turn into fleagm, nor so dry as to be converted into melancholie (and yet *Rhasis* imagineth them to have a secret property of breeding the Gout and Hemorrhoids) but turn wholly, or for the most part into blood, making a lively color in the face, and quickening both the eyesight and every sense."

But I must give my reader a note of warning lest he should get things sadly mixed in prescribing cocks and hens. "Galen saith that as the broth of a hen bindeth the body, and the flesh loosneth the same; so contrariwise the broth of a cock loosneth, and the flesh bindeth." Make a note of it!

I find a sadder warning on p. 80 of Dr. Muffett's treatise. He says that young cockerels are of all flesh the most commendable

for "nourishing strongly, augmenting seed, and stirring up lust. For which purpose *Boleslaus*, Duke of *Silesia*, did eat thirteen cock chickens at a meal; whereof he died without having his purpose fulfilled." Alas! poor *Boleslaus*, "thirteen cock chickens," and dying "without having his purpose fulfilled," and one little Brown-Sequard injection would have "filled the bill." So much for being born at the wrong time! He should have waited for the "Scientific Medicine" of the 19th century.

[How fully in accord with the eternal fitness it was that this Brown-Sequard endeavor should have its rise in the land famous above all others for what Matthew Arnold calls "the worship of the great goddess Lubricity."

And how "Science" is progressing when it can pack the *virile vis* of "thirteen cock chickens" in one little hypodermic syringe! But how short-sighted was the aged French physiologist when he forgot to seek his *Elixir Vitæ* in the cock sparrow. Will not some "scientist" try the essence of this feathered incarnation of Lubricity? Our rural cities are now paying a premium for the destruction of the sparrows: why not make them a source of revenue?] S. A. J.

MEDICINE BOUNCED FOR CHRISTIAN FAITH CURE.

A Case from Practice.

One of the many aggravations that beset a doctor in his ministrations among the sick are the good people who have passed all the examinations of a religious life, and blossomed out with a license to raise the dead and heal the sick by prayer.

As long as these people don't believe in doctors and will not take their medicine the physician makes an ass of himself in signing their death certificates. Very certainly if we are good citizens and abide by the laws of our various States, it is our duty to let them sign their own death certificates, or refer them to the medical examiner or coroner.

Among some cases of this kind which have come under my observation, I will briefly go over the history of one:

In February, 1888, I was called eight miles over the hills to see Mr. B——, a married man, 26 years old, suffering from hip disease in the second stage. Previous history of the case showed the patient to have been lame during the fall and up to this time; going around limping, with at times one hand resting on

his thigh. There had at times been pain in the back and extending to right knee, aggravated in the morning and forenoon, better towards night. On his mother's side there was a scrofulous taint. He was from this time, the second week in February, confined to his bed about four weeks, during which time he suffered with much pain in the back and hips, extending to knee, there was considerable pain in the bowels, at times so severe that Morphia was needed to control it, constipation, retention of urine, relieved by the catheter, I used during this time, Bell. θ., Coly. θ., Merc. v. 3x and Rhus tox. θ changing from time to time as each drug was indicated. Then appeared slight rigors with fever, evidently indicating the formation of pus, which was soon controlled with Sulpho. Carbo. Soda in grs. v. doses.

With a carefully ordered and nourishing diet I had the satisfaction of seeing my patient arise from his bed and get out doors to attend to his work the last of March. Indiscretion in work and a cold contracted brought on a relapse, and he was again confined to his bed; the same symptoms fought against for three weeks; and finally overcome, and by the middle of May I had the pleasure of seeing my patient out doors. I insisted upon a diet that would build up his system and prescribed the continued use of calcaria carbonica 3x. He was growing stronger daily, the soft and flabby muscles of the arms and legs filled out, and a healthy glow appeared in his face. He was now able to take care of his horse and cow, with reasonable exercise, and was walking or riding from daylight to dark.

About this time, the first of July, the village savings bank, which was leaning on his little farm, took possession of everything on account of unpaid interest, etc., and my patient and his excellent wife and pretty baby girl were set out in the street, while I, the physician, was left to whistle and sing for driving 400 miles to see him, besides furnishing medical skill.

Mr. B—— gathered together what was left after the financial crisis and moved to the other end of the State and opened a butcher shop, which he attended himself. Up to this time he had been under appropriate treatment, which was overcoming the tendency to hip disease. But now he passed from my influence and treatment into the hands of a Connecticut female Christian Faith Healer, who prevailed upon him to abandon all medicine, trust in the Lord, and be healed wholly, soul and body. And me thinks I can imagine the prayers and songs offered up while the mutton chops were weighed in the apothecarie's scales, and the porterhouse steaks sliced in the vicinity of the medulla oblongata.

Alas! the career of our butcher was in a few months cut short, for now a cane was called into requisition to help the Lord with, which was soon discarded for a pair of crutches, and they in turn for a spring bed.

In a few weeks a little band of hungry creditors, headed by the Sheriff, made an appearance, leaving our friend destitute, who, in the following spring was compelled to return to the paternal roof. Shortly after the father called me to see his son. I drove to the house and went in. Ah, what a sight met my eyes. On a bed lay this young man, a mass of skin, bones and sores. There were six discharging abcesses in the pelvic region. In weight he was reduced from 160 pounds to about 100. A pitiable object, indeed, in the last stages of this disease, and no prospect of recovery, as he was still clinging to his faith, declining to take any medicine.

In this case it will be plain to the well-informed physician that if, from the time the patient passed from under my care, he had been kept under appropriate medicines in suitable doses, in all probability the disease would have been held in check, the tubercular tendency overcome, and the victim a well man to-day, instead of languishing and wasting away on a sick bed under the mistaken idea that he was doing the Lord's will.

I cannot think of any punishment too severe or any hell too hot for the *Fiends* who are traveling this terrestial ball in angel's clothing (so to speak), who are poisoning the minds of our invalids with this Faith Cure nonsense.

Whereas, if at the proper time the indicated Homœopathic remedy were used, many now hopeless cases would long since have been well, the hills and valleys full of the echoes of Old Hundred, and the winds wafting thanks to the Almighty for the means that cured them.

H. E. C.

Falls Village, Conn.

SOUTHERN FEVERS.

(Extract from a paper read by Dr. Jesse R. Jones, M. D., of Hazelhurst, Miss., before the Southern Homœopathic Medical Association.)

The irritation to these mucous surfaces in our malarial fevers,

---

NOTE.—Perhaps the prayers and faith had not been selected with that judgment and accuracy which the Homœopath uses in choosing the indicated drug.

as well as in yellow fever, is probably due primarily to the fever poison of which an increased flow of bile and disordered digestion (biliousness) is the first symptom. Digestion being slow we first have as morbid accumulations bile and crude ingesta in various stages of putrefaction, the flow of the former having been morbidly increased by the intestinal irritation. As absorption progresses and the irritation is increased the nervous system becomes so affected that we may have anything—that reflex action, chemical decomposition or the fever poison itself may produce—from a simple indisposition or dumb ague to a most violent attack of malaria hemorrhagica or congestion, etc.

A treatment that restores capillary action at the earliest moment requires but little in the way of further treatment to meet that condition denominated biliousness, or probably I may say also to antidote the fever poison. What *Aconite* and *Belladonna* followed by *Bryonia* have done in these fevers, especially in yellow fever, are too well known to require mentioning; but if there is a periodical complication, no matter how light the attack, a speedy recovery will not take place for me without also one of the following: *Verat. Vir.*, *Gel.* or Quinine. The latter I always use in such cases by fatty inunction. If the biliousness requires special notice I can in mild cases get along with *Merc. Sol.* 2 x., a few doses, say from three to six; but in a bad case I would exchange Natrum Bicarbonicum for nothing. * * *

Almost if not all the cases of congestion of the brain will be relieved by treatment directed to the stomach. Some of these cases I have greatly aggravated before I learned better by cold applications to the head—the cap of ice or pouring cold water from a height on to the head. I have reversed the treatment—enveloping the head in clothes wrung out of hot water, and, when the patient was sufficiently congested to require it, placing the patient on similar cloths reaching the full length of the spine and the same kind of cloths enveloping the feet and hands—and saved my patient.

When the surface would redden I would take away the cloths and resort to gentle fanning of the head, and when the patient would begin to get purple again return to the hot applications and so on alternately until such treatment was no longer required.

The remedies I have most frequently used, with especial reference to that condition denominated bilious, are *natrum bicarb*, *nux vom.*, *merc. sol.*, *bryonia*, *pulsatilla* and the rhubarb compound. Other remedies as indicated (probably most frequently *aconite* and *ipecac*) have rendered it unnecessary to think

of this condition specially; but no matter how well the case is progressing if the patient has a sour stomach, or probably other morbid manifestation of that organ before the cure is completed in chronic malaria, he will relapse. I never repeat a prescription if the patient has the second or third chill after it was commenced unless the paroxysms are growing lighter.

The Southern physician of any school of medicine is quite sure to do all he thinks may prove beneficial to his patient, thereby giving him his chance to test the action of a single remedy. Those not especially conservative in their practice will do so even if there is only a greater probability of doing good than harm, and censure us for our timidity. If there is a funeral it does him no harm; "he did all for it he could." The thought never seems to occur that he did too much.

CORRESPONDENCE.

TWO INTERESTING CASES.

EDITOR OF HOMŒOPATHIC RECORDER:

In the winter of 1885 I was called to give "some relief" to a girl of ten years, living on a distant cross-road, not easy of access, in mid-winter, reported to be in the last stages of consumption. I found poor Minnie B. in a most deplorable condition, emaciated to the lowest degree, constant racking cough, expectoration free, of purulent sputa, stitching pains in lower lobe of left lung, clavicles very prominent, by the sinking of upper lobes of both lungs; exhausting night sweats, having but little sleep from the constant cough and expectoration; no appetite, the small amount of food taken but partially digested; bowels inclined to diarrhœa. Diagnosis of tubercolosis pulmonalis was too evident to be mistaken; corroborated by physical exploration of the chest.

Of course I could give the mother no rational ground of hope, nor remove her fears that before the melting of the snows her daughter would be laid to rest. After leaving such palliating remedies as were suggested, and whilst wrapping up to meet the wintry winds for my return, it occurred to me to ask the mother if her daughter had in babyhood been afflicted with a humor. The answer was instant: "A humor, sir; why, when a babe, her head was *one running sore!*" Laying aside my coat and reseating myself I asked: "Yes; and how about the case?" "A doctor

from Biddeford (allopathic) attended her for a long while; he kept her head smeared with ointments, and after months of external treatment cured her and she has had no return of humor since." Of course I am interested now. At once I laid aside the paliatives just prepared and left instead powders of Calcarea Carb. 6x trit. This remedy, after a few days, was changed for Suphur, 12x; one powder each morning for a week; after which I returned to Calcarea C. This, after a few weeks, was changed for Calcarea Phos. The night sweats, *at first*, disappeared; appetite returned; food well digested; side pains disappeared; and soon a marked change was observed in the appearance of the sputa, no longer purulent; night cough less, with return of sleep.

Improvement began in less than one week from taking the first dose of Calcarea, and continued steadily from that time. For weeks and months infrequent doses of Calcarea were administered, followed by Placebos. Near the close of the following summer I was called to the office door by the bell. Standing there was a beautiful young miss, with florid cheeks and full form, with a smiling countenance, waiting to be recognized. "Do you not know your little patient?" was the laughing query from my consumptive girl, doomed to have been laid to rest beneath the *snows of a New England winter!*

In the early spring of 1887 Miss L. M., of this village, was under my care for pneumonia, the lower lobes of both lungs affected. The case progressed favorably for some days, but resolution was unaccountably deferred. In fact both lungs continued hepatized long after the time for the expected resolution to begin. The mother, a very intelligent lady, asked me one day, if I had noticed "how free Louise's arms and hands were from salt-rheum?" This to me was the first intimation of the prior existence of eczema. At once I changed my treatment, resorting to anti-psorics. Only twenty-four hours elapsed from this change before the mother called my attention to L.'s hands. Sure enough they were well covered with eczematous patches, extending also up the arm. From this time the case progressed to a favorable termination.

LYMAN CHASE, M. D.

Kennebankport, Me., March 14, 1890.

P. S.—I would add, that my little patient (the one "in the last stages of consumption,") has been able to attend school since her recovery, and up to this date a healthy young lady, and has had no return of her malady. L. C.

Farrington claims that *Zincum valerianicum* will always cure the fidgets in hysterical and nervous persons.

WATCH THE SYMPTOMS.

EDITOR HOMŒOPATHIC RECORDER:

Three year old colt lame since September last in left hind leg (fetlok joint), don't know the cause. Was in pasture two months, came in lame. Some enlargement of the joint; for a while could get no "characteristics" to prescribe by. Lameness in no way affected by use; was about the same coming in from a drive as when going out. Gave *Rhes tox* a good trial; no improvement; then tried one or two blisters; afterwards liniments, bandaging, witch hazel, etc.; condition unchanged; was not very lame; not so but what I used him; did not show it all in walking, but *was lame*. I began to get discouraged; thought of disposing of him; finally I noticed, when in stall, a quite distinct *cracking* of that joint every time he moved it; looked it up; gave petroleum 3x three times a day for about ten days. Colt is entirely over the lameness now. H. K. LEONARD, M. D.

New Milford, Pa., March 10, 1890.

EUPATORIUM AND LA GRIPPE.

EDITOR HOMŒOPATHIC RECORDER:

For the benefit of the younger physicians, who have yet to meet "La Grippe," Eupatorium Perfoliatum 3x. dil., or higher, will do the business by prescribing once, even when *delirium* is intense. Should the patient be aged some other drug will, after 24 hours, probably be indicated. Boyonia, Kali Carb, Kali Bichr. etc. Very truly, A. M. WHITON, M. D.

South Byron, N. Y., March 6, 1890.

THE INSTITUTE SESSION OF 1890.

EDITOR HOMŒOPATHIC RECORDER:

As already announced by circular to the members of the American Institute of Homœopathy, the next annual session of this body will be held at "Fountain Spring House," Waukesha, Wisconsin, commencing at 7:30 P. M., on Monday, June 16th, and closing Friday, June 20th, 1890.

Waukesha—"The Saratoga of the West"—famous for its

"Bethesda," "Silurian," "Fountain," "Clysmic," and other mineral springs, is a town of 6000 inhabitants, situated about 100 miles north of Chicago, and 20 miles west of Milwaukee, and directly on important lines of railroad. The hotel in which the session is to be held is an immense stone and brick structure capable of accommodating 800 guests and furnished with all the modern conveniences. It is situated in a beautiful park of 155 acres, laid out with drives, shaded walks, flower gardens, etc., while the town itself presents numerous attractions to visitors in search of either health or pleasure.

The local Committee of Arrangements is making provision for the comfort and enjoyment of those who may attend the session, such as to render the occasion one of the most memorable in the Institute's history.

Under the new rule, the Bureaus will present a far greater variety of subjects for discussion than heretofore, and the papers will embrace more of the observation and experience of their writers. Important subjects of professional interest will be introduced and acted upon, and interesting reports will be presented by several committees.

Any paper, after being presented at the session, may be published in the journals at the discretion of its writer. With a view to such outside publication, writers are especially requested to have their papers prepared *in duplicate*.

Officers of homœopathic societies and institutions are urged to make prompt reports (on blanks which will shortly be sent to them) to the Bureau of Organization, Registration and Statistics. All hospitals and dispensaries, so reporting, will receive a pamphlet copy of the entire Statistical Report of the Institute.

It is desirable that the Institute should receive this year another large accession to its membership, particularly from the west and north-west, in order to secure a more equal apportionment of membership, as between the east and the west, and to augment the influence of our school in shaping legislation and defending the equal rights of homœopathists in public institutions, appointments, etc. It has been suggested that each state and local society should provide for a complete canvass of its membership in order to secure for itself a larger representation in the membership of the National Society. The initiation fee is $2.00, annual dues, $5.00, entitling the member to the annual volume of transactions. Blank applications for membership can be obtained of the undersigned.

The annual circular, giving full details of the session, the programme, railroad fares, hotel rates, etc., will be issued in

May. Any physician, failing to receive a copy by May 25th, can obtain it on application to

PEMBERTON DUDLEY,
General Secretary.

S. W. Cor. 15th and Master Sts., Philadelphia.

DYNAMIZATION.

EDITOR OF HOMŒOPATHIC RECORDER:

The following is the extract from the third selection of the Golden Treatise of Hermes:

"The dead elements (which a spirit inhabits) are revived; the composed bodies tinge and alter or are altered; and by a wonderful process they are made permanent."

"On this the scholiast comments thus:"

"The bodies of the metals are domiciles of their spirits . . . when their terrestrial substance is by degrees made thin, extended and purified, the life and fire hitherto lying dormant are excited and made to appear. For the life which dwells in the metals is laid, as it were, asleep (in senses), nor can it exert its powers or show itself, unless the bodies (that is, the sensible and vegetable media of life,) be first dissolved and turned into their radical source. Being brought to this degree at length, by abundance of their internal light, they communicate their tingeing property to other imperfect bodies, transmuting them into a fixed and permanent substance, and this is the property of our medicine into which the previous bodies of the spirit are reduced; that, at first, one part thereof, shall tinge ten parts of an imperfect body, then one hundred "then a thousand, and so infinitely on. By which the efficacy of the Creative Word is wonderfully evidenced, and by how much oftener the medicine is dissolved, by so much the more it increases in virtue; which otherwise and without any more solution would remain in its single or simple state of perfection. Here, then, is a celestial and divine fountain set open which no man is able to draw dry."

"The very same teaching is to be found in Cap VIII. of the well known alchemical work, Introitus Apertus, Etc., and also in the Opusculum of Trevisanus."

"The Golden Treatise is said to be the most ancient piece of alchemical writing extant; and whoever the author may have been . . . . . it has the impress of very great antiquity. The Scholia on it are Greek and of the New Platonists of Alexandria."

Extract from article, Antiquity of the Doctrine of Dynamiza-

tion of Medicines by Dilution, by Fenton Cameron, M.D., London, in the Organon, Vol. I., No. 3, July, 1878.

Chicago.

LA GRIPPE IN JAMAICA.

The Grippe has been here, too, and is still. Though individualizing may never be neglected, I incline to think that *Eupatorium perfoliatum* does well for it. *Kali jod. c. Merc. jod* is also good, not too often repeated.

C. REINCKE.

Island of Jamaica, March, 1890.

MULLEIN OIL IN DYSURIA.

I have had a case of dysuria in which cantharis seemed to be well indicated, but failed to relieve. Mullein oil relieved it at once in five-drop doses. Yours,

E. H. HILL, M.D.

Tunkhannock, Pa., March 4, 1890.

SELECTIONS AND TRANSLATIONS.

SURGERY AND HOMŒOPATHY.*

BY DR. J. LEESER, OF RHEYDT (GERMANY).

Rudolf A., manufacturer, 50 years of age, having a strong constitution and a bloomingly healthy appearance; about 30 years ago he lost his right testicle in consequence of suppuration following a bruise. For 10 years he has noticed a gradual increase of size of the normal left testicle, which now is of about twice the size of a goose-egg. As he does not want to be operated upon he consulted me, October 10th, 1887. The scrotum was tensely elastic and translucent; the testicle felt hard and thickened.

Diagnosis: Hydrocele.

*Translated from the *Allgemeine Homœopathische Zeitung*, December 19, 1889, for the HOMŒOPATHIC RECORDER.

The patient only complains of weakness of the sexual power, which in the last six weeks has increased to complete impotence; also of nervous sleeplessness and pruritus of the skin in general, by day as well as by night, otherwise he feels perfectly well. As neither painful points nor any other symptoms were to be discovered the patient received at once two powders of sulphur 200 C., one to be taken every eight days.

October 26th, 1887: His condition the same. Sacchar Lactis prescribed.

November 10th, 1887: The itching of the skin somewhat lessened, yet otherwise his condition the same. Sulphur, 200, one powder.

November 24th, 1887: The itching of the skin has nearly disappeared. The swollen testicle seems to feel somewhat softer. Sacchar Lactis.

December 9th, 1887: His condition is the same, on the contrary, now for the first time, two painful points are to be distinctly felt upon the neck in consequence of which the patient received seven powders of Chelidonium, 30 C., a powder to be taken every second evening before retiring.

December 29th, 1887: He sleeps much better, the itching of the skin has disappeared. The testicle feels decidedly smaller and softer. Chelidonium, 30, seven powders, as before.

January 18th, 1888: Further decrease of the scrotal tumor in size, the testicle itself is no longer so hard, the sexual desire has increased somewhat. The sleep now is seldom disturbed. Chelidonium to be taken as before.

February 2d, 1888: Further improvement; sleeps well; the medicine continued.

February 18th, 1888: The hydrocele only the size of a goose egg, the testicle softer. The medicine continued. On continued use of Chelidonium 30 there was continuous further improvement.

April 24th, 1888: Testicle normal, his sexual appetite and desire are as formerly. The patient was discharged as cured and has up to day, November, 1889, remained in good health.

Robert V. E., restaurant keeper, 45 years old, has suffered since eight years from left sided hydrocele, which has already been very frequently punctured, on an average every six months. Otherwise he is healthy. Consulted me August 3d, 1887, in order to again have the tumor punctured. As he will have nothing to do with internal treatment I punctured with the trocade.

July 9th, 1888, he had me called again. For eight days the

hydrocele, which had slowly increased in size, had become inflamed. The scrotum larger than ever, hot and reddened, the scrotum and spermatic cord very painful, feverish condition. He wanted to be punctured again, which I refused to do. I had hot poultices applied to the testicle, ordered him to bed and administered Chelidonium 30c. in water, one-half a tablespoonful every two hours.

July 11th, 1888: After profusely sweating, the pains have nearly altogether disappeared, the tumor decreased in size and the fever gone down somewhat. I ordered the medicine to be continued, one-half a tablespoonful every three hours.

July 13th, 1888: The patient has left his bed, the testicle is still sensitive to pressure, no fever; the remedy continued as before.

July 17th, 1888: Condition as before the inflammation, the hydrocele the size of a goose egg, no sensitiveness to pressure. Upon my advising him the patient allowed himself to be treated internally. Chelidonium 30c. seven powders, one every second evening.

July 31st, 1888: A great decrease of the tumor in size. Chelidonium repeated as before.

August 25th, 1888: Completely cured. No relapse up to now.

August S. Shoemaker, 40 years of age, called me October 19th, 1887. Eight years ago he acquired a gonorrhœa, which since that time always has returned with an interruption now and then. Four years ago the gonorrhœa disappeared, in place of which a left-sided orchitis made its appearance. I ordered poultices to be applied to the inflamed testicle, and Chelidonium 30, in water, one-half a tablespoonful every two hours.

October 21st, 1887: The testicle much smaller in size, scarcely painful now; the gonorrhœa has appeared again. Remedy continued.

October 24th, 1887: Testicle nearly normal; the flow from urethra is but very slight, mucous; on the contrary great painfulness on urinating, with frequent tenesmus. Remedy continued.

October 26th, 1887: The painfulness on urination has disappeared, the testicle normal, no flow from the urethra; on the contrary frequent and often drop by drop passage of the urine, the stream of urine extremely thin and often interrupted. Examination revealed such a contraction of the urethra in the prostatic region that I could not pass the finest bougie, a violin string. Instead of dilating the stricture mechanically, I administered, having in mind the itch, which he had had in his youth (these

were distinct psora-points in the iris (Peczely), Sulphur 200 c; one powder for him to take; this to be followed by alcohol.

October 31st, 1887: The urine is passed much better; no longer dropwise; yet the patient must frequently and hastily urinate; his condition the same. I ordered him to keep on drinking alcohol.

November 7th, 1887: Further improvement; the stream larger; a bougie (No. 13, French,) can be passed without difficulty. The alcohol was continued.

November 19th. 1887: Slight further improvement. Sulphur 200; one powder.

December 3d, 1887: Much better; the stream now is quite large, tenesmus less frequent. The alcohol continued.

December 14th, 1887: Further improvement. The urine is passed normally, only now and then a little tenesmus. The No. 18 bougie now passes without the least difficulty. The alcohol continued.

January 2d, 1888: He feels well, only the stream of urine is still somewhat thin. Sulphur, 200 C., in 150 grammes of water, a tablespoonful twice daily was given for four days and then allowed to act.

January 21st, 1888: Very well. The largest bougie I have, No. 24, passes without difficulty. A stricture can no longer be felt. The patient received another dose of sulphur, 200 C.

February 25th, 1888: He has remained well. The patient was discharged as cured.

Frau R., the wife of a cabinet-maker, 42 years old, came August 20th, 1888, into my care. For about the last six months she had noticed a growth gradually increasing in size in the left mammary gland. She had already consulted two allopathic physicians who regarded the tumor as cancerous and advised an operation. As the patient feared an operation she sought my advice. Examination revealed a swelling, nodose, hard and of the size of a walnut, in the upper part of the left mammary gland and also a hard swollen gland the size of a bean in the left axilla. Otherwise the patient was healthy and had neither pains nor any other symptoms. On account of the painful points I gave Chelidonium, 30 C., seven powders, one to be taken every second evening.

September 3d, 1888: Her condition the same; the remedy repeated.

September 30th: The tumor seems to have become somewhat softer, otherwise no changing. Remedy repeated.

October 4th, 1888: The patient thinks the tumor has become

somewhat smaller, which I cannot say with certainty. Remedy continued.

November 2d, 1888: Distinct decrease in size of the tumor; the axillary gland has also become flatter. With the continued use of Chelidonium in the manner mentioned. The axillary gland had by January 8th, 1889, disappeared, the tumor had become softer and diminished one-half in size.

May 15th, 1889: The swelling has entirely disappeared; the axilla is free; on the contrary the patient complains of stitches in the breast, running up to the axilla. Chelidonium 30, in water, one-half a tablespoonful every four hours, caused the pain by May 26th, 1889, to nearly disappear, when she received another dose of Chelidonium.

June 29th, 1889: The patient presented herself as perfectly healthy, which she has remained up to now.*

In confirmation of the assertion that Homœopathy is able to bring forward better results in the treatment of the so-called "external diseases" than operative surgery, for Homœopathy not only permits the diseased organs to return anatomically, but also functionally to their normal state, the following examples will suffice for the present. I give utterance to the wish that my colleagues may also bring up numbers of such cases from their practice, in order to finally put an end to the old superstition, which is generally so widespread, that operative surgery be not indispensable for the Homœopath. Hence I do not hesitate in asserting that the physician who most seldom undertakes a surgical operation through necessity is the most skillful, while he who most frequently has recourse to the knife, the worst Homœopath.

Acidum Lacticum in Arthritic Rheumatism.—We are by no means rich in remedies against arthritic rheumatism, and those which we do use lack the reputation of being reliable. A new and a reliable remedy will therefore be a welcome addition to this list. I say reliable, inasmuch as this remedy is truly Homœopathically indicated, for, according to Foster, of Leitz, Niemeyer's Pathology, 10th edition, 2d vol. pp. 561: "*Lactic acid in large doses and used for a long time will produce symptoms*

---

*I shall later report a case of cancer of the mamma, cured by Silica, as soon as the case is entirely cured. I have the patient about a year under treatment and the tumor, originally about the size of a goose egg and as hard as stone, has up to now been reduced one-half in size, is softer and the general condition of the patient has improved.

entirely analogous to arthritic rheumatism." We also find mention elsewhere that the use of lactic acid occasioned rheumatic pains in the thigh.

Clinical Cases.

1. A young girl æt. 15 was afflicted with acute arthritic rheumatism, she received acid Lacticum 2 x dil., a dose every 2 or 3 hours and was so much improved in two weeks that the pain had subsided, and for her remaining weakness China off. sufficed.

2. A nine-year-old girl was confined to her bed for three weeks with acute arthritic rheumatism. Acid Lacticum 2 speedily cured her.

3. A miner, B., had been afflicted over six weeks with acute arthritic rheumatism. The first dose of Acid Lactic 2 gave relief and a second dose cured the man.

4. In a case with swollen and very painful joints one dose of Acidum Lactis 2 sufficed to overcome the pain and the swelling. Against the remaining weakness China proved efficacious.

5. Arthritic rheumatism of the wrist vanished slowly after using Acid. Lact. 2 from two to three weeks.

6. A patient afflicted with arthritic rheumatism for four weeks, accompanied by copious perspiration, soon mended under the use of Acid. Lact. 2 and was entirely cured with two weeks.

7. Even in a case of chronic arthritis with inflation of the Epiphyses of Metacarpal bones and consequent partial displacement of the fingers. Lactic Acid 2 produced such a decided amelioration that two months later the report said: all pains are gone even the anckylosis has disappeared.

I have to add that sometimes the remedy fails, nevertheless above good results justify a trial.—*Dr. Tybel-Aschersleben, in Allgemeine Hom. Zeitung for March 13th, 1890.*

A Remarkable Case of Hydrophobia Cured with Agave Americana.—(American Aloes.)

A boy æt. 8 years was bitten by a dog on February 18th, the dog was shot on exhibiting suspicious symptoms. By March 5th the wound had healed leaving two small cicatrices and nothing abnormal was observed.

On April 17th, the boy was dismissed from the hospital to all appearances enjoying good health.

On July 7th, he became *quarrelsome, excited, affrighted* and *sleepless*; ate nothing and only by great exertion was able to force down a few morsels. Pulse small and frequent with *great anxiety*. In spite of Bromide of Potash and Chloral Hydrate all the symp-

toms of *rabies* were developed to such an extent, that his death seemed imminent on the 17th. The hapless boy had not tasted food for 72 hours and had to be tied down to prevent attacks on his nurses. As a last resort the doctors concluded to make a trial with *Agave Americana* with which the hospital grounds were fenced in. A newspaper having mentioned its efficacy. At the morning visit on the 18th a piece of *Agave* was offered to the boy, who, to the astonishment of all, eagerly bit in it and swallowed it greedily without scarcely masticating it, while before, even the view of drink and food sent him to rave. He presently reached out his hand for more and more was given him, and he hastily and greedily ate and bolted everything. All medicine was now discontinued and the boy received all the *Agave* he wanted. By evening a decrease in the violence of the nervous attacks became apparent although they were as frequent as ever, the same was the case on the whole of the following day during all of which time the boy chewed Agave unintermittently swallowing the juice.

On the 20th of July the change for the better was striking; the salivation entirely ceased; the dejections were unchanged; but the boy had slept for two hours, answered no question, and incessantly chewed the Agave, of which, however, he only swallowed the juice spitting out the rest. Slept almost the whole night to the 21st, and commences to take nourishment. On the 22d consciousness has returned but he still demands the Agave. On the 25th he only asked for Agave twice and on the 25th he finally declared that he did not want any more Agave, that it tasted too bitter and caused a burning in the mouth. As all other morbid symptoms had ceased the boy was dismissed cured.—*Fernandez Avila of J. d-Rena in El Siglo Medico.*

Tannin in Treatment of Burns.—"A correspondent of the *Pharmaceutische Zeitung*, speaking from his own experience says that Tannin cannot be too highly recommended as an application to burns, especially when very extensive, the skin being entirely removed. A five per cent. solution is squeezed from a sponge over the denuded surface, which is then dressed with some soft ointment either with or without Tannin. Pain immediately abates, and the healing process is wonderfully rapid. The Tannin solution must, of course, be freshly applied as often as the dressings are renewed."—*Druggists' Circular and Chemical Gazette.*

Mullien Oil.—In the "Progress" department is a selected paper on the use of mullein oil. This agent is of value in more ways than are mentioned in the paper, and we hope to give a fuller report at no distant date. But in its use for deafness we had a rather ludicrous experience. A prominent business man of this city, and a constant patron of the writer's, had been gradually losing his hearing each year for some years until he was quite deaf. He had been under treatment with the prominent aurists of the city until he had spent a little fortune, as he said. While still treating with one of the very best of them, his wife called at this office to obtain advice for herself, and mentioned the fact with much concern that their little boy was rapidly becoming deaf like his father, and desired some simple treatment for him. We wrote for one ounce of mullein oil, three drops in the ear three or four times daily. A number of weeks after the gentleman called with a friend, and during the conversation we incidentally enquired how his hearing was improving under the treatment of Dr. ——. "I am almost well," he remarked, "better than for years, but Dr. —— did not cure me; do you remember the drops you prescribed for the boy?" After a moment's thought we replied, "yes." "Well, I used the drops as you ordered for the boy, and improved from the first application, and stopped my visits to Dr. —— very suddenly, thanks to *your* medicine."—*Chicago Medical Times.*

VETERINARY DEPARTMENT.

Allopathy.—After reading the following can any one doubt that there is a crying need for the homœopathic school, with the word HOMŒOPATHY in caps? The *Turf, Field, and Farm* is an excellent journal, but if it would give its Veterinary Department into the hands of a Homœopathic veterinary surgeon it would be a better one. Phytolacca internally and a cerate of the same externally applied would have been the proper remedy for H. D.'s cow.

"EDITORS TURF, FIELD AND FARM—One of my Jersey cows, three years old, and second calf dropped on the 9th inst., has a swollen udder so hard and hot that no milk will come through the teats. What shall I do to save and restore it to a natural condition. Please answer at once. H. D.

"ANSWER.—Give the cow one pound of glauber salts and

half a pint of molasses, in a solution made with hot water, and given when cool. Take tincture of opium and acetate of lead of each one; water 10 parts; mix and apply warm six times a day until the fever subsides; then bathe the parts twice a day with spirits of camphor, six oil of origanum and spike, of each one part; require her to take a little exercise, and feed sparingly for a few days."

To Destroy Lice on Animals.—A wash made of the water in which potatoes have been boiled is mentioned in the *Kolonial-waaren Zeitung* as a certain means of effecting this purpose. The first application is generally effectual, but had better be repeated a few times in order to destroy the eggs. The same means may be used against the parasites in which mange originates, and probably would remove plant lice also. This insecticide property of the potato is supposed to be owing to the solanine which is one of its constituents.

Thuja for Warts.—It certainly needs no more clinical evidence than has been published, to establish the curative virtues of Thuja for all sorts of warty excrescence in the human body. It is equally efficacious when given to animals, and the charm cure cannot be exercised in their case. I had a remarkable illustration of this characteristic action of Thuja on my horse. When I purchased the animal she had a large wart on the neck, fully as large as a silver dollar, which really disfigured her. She had always had this unsightly excrescence and nothing had ever been done for it. I determined to give homœopathic remedies, given internally, without any local applications whatever, a chance, and so I gave the animal, occasionally, perhaps three times a week, a lump of sugar on which I had dropped two or three drops of Thuja, first dilution. Within two weeks the wart began to crumble away from the circumference and at the end of a month every vestige of it was gone and her beautifully arched neck was no longer disfigured. Certainly the disappearance of this large wart cannot be attributed to any other cause than the direct action of Thuja on the skin and it shows that this remarkable drug acts as well on animals whenever the case comes within its legitimate therapeutic range. W. B.

Traumatic Indigestion—*Bovine.*—B. Berger reports two cases of this not common disease, marked by an uneventful course. Yet they are quite interesting, for the usual course of foreign bodies swallowed with the food is to cause a chronic indigestion of the second stomach, and make their way out through the diaphragm to the heart, and to cause a traumatic pericarditis, re-

spectively myocarditis ending in death. These cases, however, were different, for they took another way, and, arriving at the surface of the body, were eliminated by the formation of an abscess.

The first course was diagnosed as a traumatic pericarditis. In the meanwhile a "very large swelling" formed upon the breast, discharging, containing a common sewing-needle. After removal, recovery took place. The needle had passed through the diaphragm, from the stomach, probably through the subpleural connective tissue, and the anterior mediastinum to the surface. Recovery.

In the second case, the case was diagnosed as "traumatic indigestion." Behind the fore-leg (elbow-joint) upon the chest walls, there formed a swelling, hard and painful, the size of two fists, which also suppurated, forming an abscess, which contained a nail, about two inches and somewhat curved.—*Bad. Thierarztl. Mitth., 1888.*

Dysentery in Parrots.—Dysentery carries off a great many birds—especially while they are young. One cause may be lack of gravel, which they need for digestion. A few pellets of Mercurius corros. two hours apart, will speedily cure them.—*Probatum est.*

Chicken Cholera.—I can fully endorse the curative powder of *Iodide of Arsenic* in certain forms of humid asthma, having been successful in a few cases. I want to speak of this medicine as a means of curing the summer complaints we often meet during the hot weather. Two years ago I lost almost all my chickens by chicken-cholera. Last summer a new lot of hens and chickens began to die off by the same disease. I thought it a good chance to try *Ars. Jod.* I mixed about two pounds of meal with two drachms of the remedy, and left the mixture in the chicken-house for them to take at will. It cured every case. I had a good lot of it left to throw away. In severe cases of cholera infantum it promptly cures when all our usual remedies failed.

—*Robert Boocock, M.D., in N. A. Jour. of Hom.*

A Silicea Case.—Two cats had a fight. One of them was *our* cat. *Our* cat gained the victory, but he received a wound in his left cheek, inflicted by the dirty claws of the other cat. The wound, being thus poisoned by the inoculation of septic matter, speedily degenerated into an ulcer, from which flowed *an ichorous offensive pus.* So offensive was the odor that we were obliged to exclude his catship from our highly desirable society—greatly to his surprise and displeasure. The ulcer also increased, it is

probable, by reason of his constitutional tendency to mange. He had only just recovered from an attack of the latter under Bell.ₓₓₓ. For the offensive ulcer was now prescribed Silicea ₓₓₓ, two doses. In three days the odor was entirely removed; in a week the ulcer was practically healed, and he was restored to his place in the "bosom of the family."—*Homœopathic Physician.*

Catarrh in a Parrot.—Mrs. V. C. requested me to call on her on account of her little favorite "Jocko," a beautiful parrot's serious indisposition. On my arrival "Jocko" sat in his beautiful house in a very much depressed humor; he would not listen to the lady's call, neither would he touch his favorite food, and only emitted snoring, rasping sounds. On examination the symptoms of a severe and persistent cold were apparent, accompanied, as is most always the case, by an occlusion of the nasal openings, rendering breathing difficult. Other veterinarians had ordered steam baths, in such a manner that the bird was placed on a cane-bottomed chair, underneath which was placed a pot with steaming chamomile tea and the whole arrangement covered with a cloth. It was not a success, for the bird had such suffocative attacks while in this steam-bath as to barely escape with his life. I prescribed Dulcamara 6x and Hepar sulphur 6x, in alternation twice a day 4 pellets of each remedy, and advised that oil of almonds be applied to his nostrils, with a view of loosening the adhered slime. Three days after I was greeted by the joyous lady with the report that "Jocko" was himself again. And when I stopped at his house he greeted me with a hearty "good morning!" followed by a "thank you." The bird was cured.

—*H. Fischer, Veterinarian in Berlin.*

Cough—Equine—Cured by Bryonia Alba.—Some time ago a friend of mine was asked to step down to the stable and see a favorite black horse, belonging to a patient of his. The equine patient a mare, had been suffering for a couple of days from a cough which seemed to be quite obstinate, and to resist the ordinary domestic remedies and means usually at hand. The animal was found with *a hacking deep cough, dry apparently, and seemingly aggravated upon moving about and going into the open air. Indeed, the slightest motion would set her to coughing.* Digestion was disturbed somewhat, with poor appetite, constipation also being present. Viewing the symptoms as a whole, he administered on account of the salient and prominent symptoms Bryonia alba, θ, 5 drops, three times a day and with the proper diet and care the cough disappeared gradually, the appetite increased to normal, the stools resumed their normal appearance and in about four days the animal was entirely well. [*Communicated.*] A. F.

Asthma—Equine—Lobelia Inflata.—A dray horse which which had been quite heavily worked, and which was apparently in good condition otherwise, had been suffering for some four or five years, from heaves. The functions of the animal were well performed, and hence the trouble was diagnosed and regarded as nervous in its origin, and on account of the prominent symptom *Lobelia inflata*, was given to the animal, in the form of the vinegar of the plant three times daily, with the happy result of producing a cure at the end of two days. The horse was then as serviceable as ever. [*Communicated.*] A. F.

Retention of Urine in Horses—*Gelsemium semp.*—Last summer Dr. G., while driving his horse one forenoon a long distance without stopping, noticed that towards the end of the drive the animal manifested signs of uneasiness and disquiet. On driving into the stable it became more uneasy, anxiously twisting itself about, pawing with its hind feet and glancing uneasily at its abdomen, in fact showing symptoms leading one to think of colic, with the difference, however, that it attempted often to urinate, passing, however, but little or no urine. If any urine was passed it was done with exertion and pain, the fluid passing drop by drop. Upon examination, rectally, the bare hand and arm being thrust into that tube, a tensely distended bladder was palpable, which pressed upon caused the animal to express pain. As he could not lay the cause of the retention to anything beyond the mere going so long without urinating, with the consequent results, he administered Gelsemium semp, 5 drops of the tincture in water every fifteen minutes. In the course of thirty minutes the animal passed a large amount of urine, after which it showed some interest in its surroundings, began to eat and in a few hours it felt apparently well. [*Communicated.*] A. F.

Nephritis Canine.—A young dog, the property of E. was thrown into a pond while the water was cold in consequence of which the animal caught a terrific cold, some force of which seemed to spend itself upon the kidneys. Upon visiting the canine patient, the animal was found to be feverish, the posterior parts stiff apparently from the manner which it dragged itself about; the lumbar region upon pressure seemed painful, the urine was passed with pain and strangury, it being of a darker color, more concentrated and bloody somewhat at times, especially after the disease had progressed a few days. The stools were passed at long intervals and were hard and dry.

As the diseased process had begun apparently from the wetting *aconit. nap.* was given every half hour, in water. The animal was well covered and given soft and unirritating food, fresh drink-

ing water and kept in a well protected place. The *aconit. nap.* ameliorated the primary symptoms somewhat and was continued to be given. Finally the slight hæmaturia appearing *cantharis.* was given in alternation, which two medicines together in the course of about ten days led to a cure. [*Communicated.*]

Hypericum Perf. as a Prophylactic Against Tetanus.—Dr. R. had the misfortune to have his favorite horse tread upon a rusty nail which happened to be in a board in the path of the animal. He alighted, extracted the offending splinter of iron, and found an ugly hole left behind in the hoof of the horse. He stuffed the hole full of cotton to keep out the dirt until he could get home, a short distance away. On getting home he immediately packed the place with cotton soaked in the tincture of Hypericum perforatum. A rest of a day with the packing frequently changed left the animal in good health, the wound healing kindly and giving no trouble. [*Communicated.*]

Arnica Montana in Traumatic Ulcer of the Cornea.—Mr. Z's. valuable horse was noticed one morning to have some trouble with its left eye. After coaxing and petting the animal it allowed one to open its injured eye, when a small gathering process upon the cornea was seen, which was undoubtedly due (confirmed later) to a snap of the whip. Arnica was given internally, which seemed to hasten the process of absorption, and healing took place, leaving only a small and nearly invisible cicatrix upon the cornea. [*Communicated.*]

BOOK NOTICES.

Foods for the Fat: A Treatise on Corpulency and Dietary for Its Cure. By Nathaniel Edward Davies, member of the Royal College of Surgeons, England. American edition. J. B. Lippincott Co. 1889. Cloth. 138 pages. 75 cents.

The stubborn problem that confronts thousands in this age of good living—the adjective applies to the food at any rate if not to the eater—is how to get rid of their fat. Some adopt heroic measures and starve themselves; but that is uncomfortable; others take anti-fats or exercise, but generally to no purpose. Dr. Davies claims to have blazed out a road to leanness which, if it lead there, is certainly a royal one. This is what he promises: "Happily for such people"—the corpulent ones, of course—"science comes to their aid, and, without curtailing very much

the pleasures of the table, the diet may be so arranged that, without any danger to health or length of life, a person may slowly and safely reduce bulk and fat to a degree compatible with enjoyment." In other words, it is not so much the quantity as the nature of the food that tells. The book tells what may be eaten and drunk with impunity, and in looking over the twelve monthly bills of fare we think that any one who could not live on them must be a gourmand indeed.

Essentials of Gynæcology. With numerous illustrations. By Edwin B. Cragin, M. D., Attending Gynæcologist, Roosevelt Hospital, Out-Patients' Department; Assistant Surgeon, New York Cancer Hospital. Cloth. 192 pages. $1.00.

Essentials of Diseases of the Skin. Illustrated. By Henry W. Stelwagon, M. D., Physician to Philadelphia Dispensary for Skin Diseases; Chief of the Skin Dispensary in the Hospital of University of Pennsylvania; Physician to Skin Department of the Howard Hospital; Lecturer on Dermatology in the Women's Medical College, Philadelphia. Cloth. 270 pages. $1.00.

The Examination of Urine, Chemical and Microscopical, for Clinical Purposes. By Lawrence Wolf, M. D., Physician to the German Hospital, Philadelphia. Cloth. 66 pages. 75 cents.

These three books, published by W. B. Saunders, are very handy for students and, indeed, for physicians as well. They are well indexed and illustrated, and the text matter is in the form of questions and answers. Take, for instance, in first-named book, the part on "Displacement of the Uterus;" here the first question is, "What do we mean by a displacement of the uterus in a clinical sense?" Then, "What are the principal displacements of the uterus?" "What is the difference between a 'version' and a 'flexion?'" "What is the pathology?" "What is the etiology?" and so on. Opening book of the skin at random we find, "What is scabies?" "Describe the symptoms of scabies." "What do you mean by burrows?" Apparently every question bearing on the subject of each book is asked and answered in a clear manner. Perhaps the only answers Homœopaths will reject are those to the questions, "What is the treatment?"

Essentials for Forensic Medicine, Toxicolgy and Hygiene. By Armand Semple, B. A., of London. Cloth. 196 pages. $1.00.

This work, like the three preceding, is from Mr. W. B.

Saunders. We cannot, perhaps, do better than quote from the prefatory note: "Forensic medicine, medical jurisprudence, or legal medicine is the part of medical science in which the connection between law and medicine is treated. It also deals with cases which are connected with the administration of justice, and with questions that involve the social duties and civil rights of individuals. Toxicology is the name applied to the division of fornesic medicine in which the nature and detection of poisons are treated, as well as the treatment of the poisoned. Hgygiene includes the laws affecting the individual and social relations and well being of man—health and sanitation." From this it will be seen that the book, compacted as it is with information on these points, is one worth a place on the book-shelf. The book opens with "Medical Evidence," followed by "Personal Identity," "Age," "Sterility and Impotence," "Rape," etc. The part on Toxicology is very useful and handy; the symptoms of each poison are given together with amount required to destroy life, appearance after death, treatment and other points. It may not be uninteresting to note that under "Copper-Cupram," is the following: "The special symptom is *jaundice*, which is nearly always present." The italics are the authors. There is an index and also one hundred and thirty cuts.

The International Medical Annual and Practitioner's Index for 1890. Edited by P. W. Williams, M. D., Secretary of Staff, assisted by a corps of thirty-six collaborators. 600 pages. Illustrated. Cloth. $2.75. E. B. Treat, New York.

This work is a compact *resume* of the progress, theory and experiments in medicine for the past year, and will prove a handy volume for those who wish to keep in touch with the medical world at large. Forty-five pages are taken up with "New Remedies," and Homœopaths will smile, perhaps, to see some of their old and time-honored remedies and treatments classed as things "new;" *sulphur*, for instance, in "very small doses," for a good many things, and among them "skin diseases." "Thermo-Therapeutics" succeeds and is followed by "Electro-Therapeutics," and this by "New Treatment," which department occupies 424 pages. "Sanitary Science" and "Life Insurance" close the book. In running through a work of this sort, dealing with things new, one is struck by the predominance the products of the chemist's laboratory over the simples of nature. Yet, nature's simples, rightly applied, are the best. The price of the book is $2.75.

Practical Electricity in Medicine and Surgery. By G. W. Overall, M. D. 128 pages. 8 vo. Memphis. 1890. $1.00.

The aim of this work, to quote from the author's preface, is: "to give a short and concise summary of the practical uses of electricity as confirmed by numerous years of experience, and to demonstrate its value in certain diseases (such as the cure of stricture by electrolysis), the treatment of which, by this method, has been regarded with indifference by some and overrated by others." The book is largely made up of cases from the author's practice, and for those who employ electricity in their practice it will probably much more than repay its cost.

Homœopathic Therapeutics.—Third, rewritten and enlarged edition, by Samuel Lilienthal, M. D. Philadelphia. 1890. 1,154 pages. Cloth, $7.00. Half Morocco, $8.00.

This "third edition" is really a new work, being 319 pages larger than the second edition. It is dedicated to "Dunham, Farrington, Hering and Lippe." "Once I was young, but now I am old," says the faithful worker in his exceedingly brief preface: "My task is done; and if ever a fourth edition will be necessary I can leave that work now in conscientious hands." A work of this nature, and especially one so well known as "Lilienthal's Therapeutics," needs no comments beyond the announcement that it is now on the bookseller's shelves, that the type is good and also the printing.

A Hand-Book of Diseases of the Skin and their Homœopathic Treatment. By John R. Kippax, M. D., LL. B. Fourth edition, revised and enlarged. Gross and Delbridge, Chicago, 1890. Cloth.

After having been out of print for about two years a new edition is now offered, of 294 pages. "Advantage has been taken," says the author "of the opportunity afforded by the call for another impression to introduce a chapter on diet and hygiene and make such changes in the text as the continued advance in dermatology demands." The fact that the book has gone through four editions demonstrates that it is a valuable one, and we can only regret that the author has seen fit to introduce cuts, and rather poor ones, too, of instruments bearing the makers' names in rather bold type. We do not see how the cut of a corn knife with the maker's name on the blade is to be of value to the practitioner, This, however, will apply to a good many other books besides Dr. Kippax's valuable work.

Euphorbium is useful in caries and other diseases of the bones.

Corallia rub. may be found useful for a combination of syphilis and psora.—HERING.

Homœopathic Recorder.

PUBLISHED BI-MONTHLY BY

BOERICKE & TAFEL,

1011 Arch Street, Philadelphia, Pa.
9 North Queen Street, Lancaster, Pa.

SUBSCRIPTION, $1.00 PER ANNUM.

Address communications, books, etc., for the Editor to E. P. Anshutz, P. O. Box 921, Philadelphia, Pa.

Thlaspi Bursa Pastoris.—Dr. S. A. Jones writes us that he is preparing a paper on *Thlaspi* for the RECORDER. Our readers, we are sure, will look for its appearance with interest. If a tithe of what is said of this remedy is true it is one that should be largely used and could be with profit to the doctor and relief to the patient. Radeemacher, among other things, says of it: "But the most important remedial power of this common innocuous plant I learned from no medical author; the knowledge of it was actually forced upon me by the following case: I was called to see a poor woman from whom, eight or ten years before I had brought away a large quantity of urinary sand by means of magnesia and cochineal, and thereby cured her. Now, the tiresome sand had again accumulated in the kidneys, and the patient was in a pitiable state. The abdominal cavity was full of water, the lower extremities swollen by œdema, and the urine of a bright red color, which formed, on standing, a sediment unmistakably of blood. I prescribed tincture of Bursa pastoris, 30 drops, 5 times a day, solely with the intention of stopping the hæmaturia as a preliminary; but imagine my astonishment when I found that the tincture caused a more copious discharge of renal sand than I had ever witnessed. Paracelsus' words occurred to me: 'A physician should overlook nothing; he should look down before him like a maiden, and he will find at his feet a more valuable treasure for all diseases than India, Egypt, Greece or Barbary can furnish.' I should certainly have been a careless fool had I, with this striking effect before me, changed to another medicine. I continued to give the tincture; I saw the urinary secretion increase with the copious discharge of sand; the water disappeared from the abdomen and extremities, and health was restored. I went on with the tincture until no more sand appeared in the urine, and I had every reason to suppose that the deposit of sand was completely removed. Since then I have used this remedy in so many cases with success that I can conscien-

tiously recommend it to my colleagues as a most reliable remedy. Among these cases was one which appeared to me very striking. It was that of a woman, aged 30, who came to me for a complication of diseases. I examined the urine for sand, but found none. I gave her the tincture of Bursa pastoris, and a quantity of sand came away. On continuing the tincture much more sand came away, and her other morbid symptoms disappeared."

There is one peculiarity about some of these remedies, like *Thlaspi*, *Mullein Oil*, and *Passiflora*, and that is, that they must be given in larger doses to obtain the best effects.

Statistics.—Dr. L. L. Helt, in *Hom. Physician*, furnishes the following figures, which are good food for thought for those who maintain that there is no longer any difference between Allopathy and Homœopathy: "In 1885, under Allopathic treatment, there were 39 deaths in the Ohio State Penitentiary, at Columbus. For the first seven months of 1886 there were 18 deaths. Governor Foraker then appointed a staff of Homœopathic physicians, among whom were Drs. Clemmer, Helt and Howell. Under the new *regime* the deaths for the remainder of 1886 fell to 3. In 1887 they were 18; in 1888, 19; and in 1889 but 20, though the population had materially increased. In other words, when the sick were put under Homœopathic treatment the death rate fell off over one-half. In the face of such returns how in the name of humanity—of common sense—of horse sense, can men maintain that there is 'no difference!' "

"There's Millions In It."—The neatness with which German drug houses patent and trade-mark a medicine, and then make the doctors free advertisers for it, betokens a certain shrewdness in the German mind and vacuity in the American mind that is not credited to them respectively by tradition. When an American patented and trade-marked medicine goes to Europe it is quietly led to the door and the official boot-toe makes one vigorous outward sweep, there is a dull thud and—exit patent medicine. Antipyrin, Sulphonal, and other German patent medicines meet with quite a different reception in America, as every one knows, though perhaps every one does not know that they are virtually patent medicines. Mrs. Winslow, Castoria, S. S. S., "Dr." Pierce, Warner and other great medicine men of Yankeedom ought to go to Europe and sit at the feet of their German brethren as pupils.

Nocturnal Enuresis.—Dr. I. J. Lane, of Sing Sing, N. Y., reports a case of nocturnal enuresis in the *Chironian*, which is very interesting for two reasons, the first of which is, that it

shows the power and *quick* action of a Homœopathic remedy properly chosen; while the second, but less satisfactory reason, is, that it reveals the weakness of those who seek for light outside the pale of *similia*. A little girl, five years, had the following symptoms: "Nocturnal enuresis, agg., during the full of the moon. Craves sweets; fretful; changeable; appetite changeable; don't care for meat or potatoes; urine very strong, staining yellow. Blond, rosy cheeks, nervous temperament." She had been treated by an Allopathic physician and a Homœopath, and both had finally dismissed the case with the remark, that "she will outgrow it." But the nightly flow of urine continued. A good Repertory was consulted, and amid a host of remedies (so confusing to the indolent temperament) *Sulphur* had the greatest number of the symptoms of the case. So *Sulphur* 30 was given on August 17th, and on November 10th "she has not had any return of her old trouble since the first night after taking *Sulphur* 30."

The Scientific Method—. The New York *Medical Times* prints a case of cancer that eats seven pounds of beefsteak per diem; the provender is externally applied and "when taken from the cancer there is nothing left of the beef but the tissue and tough parts of it." Boarding house beefsteak, it is plain, will not do. As long as the cancer gets its rations outside it lets the patient alone and the inference is that they live together quite amicably. But for all that we'll bet a cow against a Chicago beefsteak that when a cure is discovered for cancer it will be Homœopathic and not "scientific." Indeed "science," so-called, unguided by law, is like a ship without rudder or sails; it drifts with any current that catches it and, *mirabile dictu*, calls that movement Progress! There is but one Law revealed in medicine and that is summed up in the word Homœopathy.

"Once More Unto the Breach!"—Sir Knight Eccles, M.D., of the peaceable City of Brooklyn, and his faithful Squire, the editor of the *Druggists' Circular*, have had another merry joust at the Homœopaths. We noticed their last tournay in the RECORDER for September, 1889. The editor belabors "high dilutions" with his lusty cudgel with such robust thwacks: "The process is one of bottle washing pure and simple." Having pummelled high dilutions to his satisfaction, he turns his attention to those who use them and launches out thus: "Comparatively few of the so-called 'Homœpaths,' however, use 'high dilutions' to-day, the majority administering their remedies in the same way as regular physicians." He concludes with an

exhortation to the "regulars" to close in on the Homœopathic school and finish it up by absorbing it.

We mean no offence to the commercial metropolis, and hope it will not get "mad" at a country cousin for suggesting that at times it shows a certain provincialism found nowhere else. Thus, because a few metropolitan, erstwhile Homœopathic, physicians have left the fold of *similia* and gone over to the ranks of those who prefer to call themselves "scientific" physicians, there seems to prevail in the metropolis an idea that Homœopathy has passed into the category of things that have been but are not. No doubt the little hen, in Andersen's tales, who announced that the sky had fallen because a rose-leaf lit on her tail, firmly believed that she spoke the truth, but then the sky, for all that, did not fall and was rather bigger than the leaf. So is the United States a little larger than New York. Besides, there is the rest of the world in which Homœopathy is not unknown or unpracticed. We think that when the time comes for the "regulars" to swallow the Homœopaths, and they discover that they will have to swallow at the same time some twenty million sturdy laymen, they will be forcibly reminded of the rough old adage: "Don't bite off more'n you can chaw." And then there are the Eclectics, who are a tough lot!

So much for the editor. Now for the knight.

He, Knight Eccles, M. D., with visor down and lance at rest, rides most furiously at his ancient enemy, Dr. Swan. The Doctor has been fluttering a little four-page leaflet to the La grippe breeze, in which he warns the public against the danger of quinine, so freely prescribed by the regulars (and, we, fear, by some irregular homœopaths), and asserts that of the 82 corpses, *all suicides*, at the New York morgue on January 6th, "many or most of these deaths could be accounted for by their taking quinine." And again, "I think if the truth were known, hardly a person died of the grippe, that has not taken quinine." Now, observe how the "scientific" lance of Dr. Eccles crushes through this Homœopathic heresy. "Very likely" replies Dr. Eccles, "We can also add that hardly a person has died of the grip who has not taken bread, potatoes, beans, meat or pie."

To such a "scientific," (to say nothing of self-evident) argument, there can be no reply.

THE
HOMŒOPATHIC RECORDER.

VOL. V. PHILADELPHIA AND LANCASTER, JULY, 1890. NO. 4.

AURUM METALLICUM AND SYPHILIS.

EDITOR HOMŒOPATHIC RECORDER.

SIR.—I beg to forward herewith statements of two cases which I treated successfully by *Aurum Metallicum*, for an insertion in the HOMŒOPATHIC RECORDER, with a hope that they may be of use to some of the numerous readers of your valuable journal.

CASE NO. 1.—A gentleman, a broker, aged about 45, had Otorrhœa *from infancy*, affecting both the ears. In March, 1884, he had an attack of Syphilis, with buboes. He had *mercurial treatment* at the hands of an Allopathic physician. After the cure of the *primary-sore* and the *buboes*, symptoms of secondary Syphilis, affecting mostly the mucous-surfaces, made their appearance, on account of which the patient had sore mouth, sore throat, and sore in the nostrils. He had Iodoform application in the nostrils for about six months, with no benefit whatever. On the contrary the sores in the nostrils, mouth and throat, which almost prevented his swallowing even liquids, continued increasing. The Otorrhœa, which was in existence from *infancy*, also increased so as to threaten deafness. The brain too seemed to me to have been affected, on account of which the patient felt dizziness in the head, and Vertigo *constantly*. The gentleman consulted me in the beginning of March, 1887. On hearing the history of his case, I prescribed *Nitric Acid* 1x, in water, in one-drop doses; three such doses daily. After a week I saw the patient again, when I found sore mouth much improved, and the ore in the nostrils much better; but the Otorrhœa remained in he same state as when I saw him first. The nose and the ears nitted such a *fetid smell* that one sitting by him would be in-ined to nausea and vomiting, not to speak of the great annoy-nce which the patient himself felt on that account. The dis-harges from the ears and nose continued as profuse and fetid as efore. I ordered *Nitric Acid* 1x again, as before. After a eek I saw the patient again. On examination I found no sore

mouth, no sore throat; but the Otorrhœa and ulceration in the nostrils continued in the same state as before, in spite of the above treatment. I now prescribed *Aurum Met.* 6., in water, three doses daily. There was no improvement either in the nostrils or the ears even after two weeks' treatment with this agent. I now prescribed *Aurum met.* 30, three doses daily, for two weeks. No improvement still. On the contrary, the nostrils became blocked up by the dried-up fetid discharges, on account of which the patient could breathe only through the mouth. The Otorrhœa also remained in the same state as before. Upon this I prescribed *Aurum Met.*, 200, a dose, every other day, at bedtime at night. I found no *change whatever for the better*, either in the ears or in the nose by this treatment even in four weeks. But one hopeful sign, which I noticed, was that the disease *did not increase*. I then thought of giving the case up as hopeless, and accordingly told the relations and friends of the patient my opinion and at the same time told them to change the treatment if they liked. But the patient who seemed to have been much disgusted with Allopathic treatment would not change the treatment, in spite of the very strong remonstrances from his friends and relations, and he insisted upon my treating him for a couple of months more. I now prescribed *Aurum Met.*, 2 x trit., in ½ grain doses, thrice daily. On the eighth day I saw the patient again, and, on examination, I found Otorrhœa much better; ulceration in the nostrils much better, no fetid discharges either from the ears or the nose; the discharges having changed into a thin matter which was very small in quantity. The patient now felt no difficulty in breathing through the nostrils. He took his food well. He now felt little or no inconvenience either on account of the ears or the nose. I ordered *Aurum Met.*, 2x trit., again, a dose every other day, at bedtime at night. After a week, I saw the patient again. I found there were no discharges from the ears or the nose or any ulceration in them, but the patient complained of much *general debility*, so much so, that he was quite disinclined to speak even a word, and he wanted his friends and relations near him to let him alone. I stopped the medicine, and prescribed Cod-liver oil and generous diet, consisting chiefly of home-made bread, meat, some vegetables, disallowing him milk altogether, as, I believe, milk induces an increase in the pus-forming elements of the blood. Four weeks after this, I saw the patient again, when I found him quite well. His weakness had gone, he had felt no pain, no inconvenience, either in the ears or the nose, except a *little hardness of hearing* in the left ear, and a *little of nasal tone*

while speaking. He continued the Cod-liver oil and the diet for six months more. I saw him last in August, 1887. Since then he did not see me, because I was away from Calcutta for a year and a half. He saw me here in October last, when he said he had nothing to complain of except a little *nasal tone* during speaking and a little *hardness of hearing* in the left ear.

CASE NO. II.—A woman, aged about 20, had an attack of Syphilis in February, 1885. She said she was treated by a Nature Doctor, attached to a Coolie-Depôt, who, I understand, gave her *Mercurial preparations*, both *externally* and *internally*. The Primary Sore was cured in one month. In May, 1886, she consulted me. She said that she felt as if she had sores in her mouth, throat and the nose, with much fetor from the nose, which annoyed her and the people around her very much. I at once prescribed *Nitric Acid* 1x, in water, in one-drop doses; three such doses daily. On the fourth day from the commencement of my treatment the patient came to me. I examined her and found the sores in the mouth and throat much better. I ordered the continuance of the *Nitric Acid* 1x, as before, for a week. On the twelfth day the patient came to me again and said that she felt as if she had no sore in the mouth or the throat; but the sore in the nostrils grew worse and emitted a very fetid smell, which made her sick, and the discharges, which were very thick and profuse, almost blocked up the passages of the nostrils, on account of which she could breathe only through the mouth, which again, on account of the fetor, induced nausea and even vomiting. She also felt a depression at the bridge of the nose, which distorted the organ. I prescribed *Aurum Met.*, 2x trit., in ½ grain doses, thrice daily, for two weeks, after which she came to me again, when I found, on examination, no discharges from the nose, nor any fetor from it; but thick crusts, formed by the drying up of the discharges, obstructing the passages of the nostrils, which again obstructed breathing through the nose, and she felt a kind of *burning* and *tensive* uneasiness in the nostrils. I advised the application of a piece of lint, soaked in Olive oil, to the nostrils and to see me the next morning. The next morning, on examination, I found that the crusts were softened. By means of a pair of forceps I took off the crusts from both the nostrils and found that the ulceration there had almost healed up. I continued *Aurum Met.*, 2x trit., a dose daily at bedtime, at night, for a week, after which the patient came to me. I then found no ulceration in the nostrils and the patient said that she felt no pain or inconvenience whatever, except a *nasal tone*, which she felt during speaking and that she felt very weak. I advised her to

take Cod-liver oil, three drops at noon and three drops at night, *after meals*. She continued Cod-liver oil till June, 1887. I did not see her till September 12th last, when she came and told me that the object of her present visit to me was "to thank" me for a very "*marvellous cure*" of her "disease."

On the 8th of October last she came to me and said that she felt much pain in the region of both the Ovaries and that the pain she felt was of an *intermittent* and *throbbing* character, and it troubled her so much that she said she often thought of committing suicide during its paroxysms. On examination, I found the *ovaries* much *swollen* and *indurated*, feeling like a *Chondroma*. She also felt much tensive uneasiness in the eyes. On examination, I found that she had Conjuctivitis, looking like what we generally see in Syphilitic patients. On inquiry I learned that she had this complaint since the attack of Syphilis. She also complained that she was "gradually getting blind." I sent her to the Ophthalmic Hospital of the Medical College here for a careful examination of her eyes. After examination, the hospital authorities granted her a ticket in which I saw it stated that her case was one of "Chronic Conjunctivitis and Opacity of the Cornea," "probably of a Syphilitic origin." She also complained of bone-pain, especially at night, and also a shooting pain in the regions of both the kidneys which tormented her beyond measure. The eyelids were found œdematous. This last symptom led me to suspect the presence of *Albumen* in the urine. On a careful examination of a morning urine, I detected a very *appreciable quantity* of Albumen.

Now, on a careful study of the Pathogenesis of *Aurum*, I found that the symptoms of the drug almost corresponded with the symptoms which the patient complained of. So I *at once* prescribed *Aurum Met.* 2x trit., in one-grain doses—three such doses daily. In two weeks' time all the trouble she complained of was over—the *Opacity of the Cornea* had gone, and no pain or inconvenience was felt in the eyes; there was no pain, hardness or swelling in the ovaries; the menstruation which remained suppressed for a long time, reappeared; the bone-pain (I think Periostitis) also disappeared. On examination, I found no trace of Albumen in the urine. I undertook the treatment of the case of this woman for the second time on the 13th of October last and on the 10th of November last I saw her, when she said she was *all right* and that she had nothing to complain of except a little general debility on account of which I prescribed Cod-liver oil as before during her convalescence after the first illness. Yesterday I saw her again and found her very easy and comfortable.

I have cured many very bad cases of Ozœna of a Syphilitic origin by *Aurum Met.*, which, I believe, has a *specific action* on the nose, especially when the affection of the organ is of Syphilitic or Mercurial origin; but I have never treated a case, in the course of my 17 years' practice as a Homœopath, of Otorrhœa of Scrofulous or any other origin with this agent as I did in Case No. 1 above mentioned. So I would like to see this agent given an extensive trial by the profession in the treatment of Chronic Otorrhœa, be it of any origin, whenever any occasion offers. I believe from experience, that *Aurum Met.*, in Potencies above the 3x trit., is not likely to do much good in the treatment of diseases, especially of Syphilitic, Mercurial, or Scrofulous origin. I also believe, from experience, that Cod-liver oil, which is supposed to contain some trace of Iodine in it, removes the *constitutional* taint, such as that of Syphilis, Scrofula, etc., which may, and, I believe, does, retard the action of remedies in the treatment of diseases of a chronic nature. I have always found it a great *auxiliary remedial measure* in the treatment of chronic diseases of a constitutional nature, and I would recommend its trial accordingly by physicians of *all schools*. The dose of the oil must on no account exceed 5 drops at a time, twice daily, after meals. Care should be taken, when prescribing the oil, that the patient for whom the oil is prescribed may not have any stomach or bowel complaints, as in that case they will feel *decidedly worse*. The oil is decidedly prejudicial to patients suffering from Diarrhœa or Dysentery, whether Acute or Chronic.

Yours truly, R. K. GHOSH.

38 Simlá Street, Calcutta, February 25th, 1890.

A SOUTH AMERICAN REMEDY.

EDITOR OF THE RECORDER.

I answer with much pleasure yours of October 24. I will tell you something more about *J. Gualandai.* It is a remedy very much used by the natives of this country for the cure of atonic and syphilitic ulcers. It is a powerful disinfectant and microbicide. I believe it will kill the syphilitic microbe, because the prostitutes are very fond of it. I have cured many cases of acute blennorrhagia with the mother tincture, and many ophthalmias with third dilution taken internally. I prefer it to any other in the ophthalmias with nocturnal agglutination of the lids. It pro-

duces diarrhœa and vertigo when the dose is very strong, v. g., 1 oz. I inclose you with this the proving of *jacaranda*.

Yours fraternally,

JULIO F. CONVERS.

Bogota, March 24, 1890.

Proving of Jacaranda Gualandai.

Dr. Jose M. Reyes, of Bogota, S. A., of 21 years of age, solemnly declares, that enjoying good health, and at the request of Dr. J. F. Convers, he took the mother tincture and dilution of *Gualandai*, with the object of ascertaining its effects.

On the 2d and 3d of February, 1885, he took 12 drops of the tincture, prepared from the dry leaves, and he only felt at night pain between the sacrum and coccyx. On the 4th he took 26 drops and only felt vertigo on raising the head after stooping, with momentary loss of sight and weight on the forehead. On the 5th he took 2 grammes twice a day, and he continued taking the same dose until the 9th without feeling but a diminution of the memory. On the 10th he commenced to take 5 grammes twice a day, and on the 11th a diarrhœa, of a dark mulberry color, made its appearance, which persisted till the end of the proving. On the 13th he took 10 grammes without any other symptoms but an increase of the diarrhœa. From this date until the 16th he took 10 grammes every twelve hours with only the mulberry-colored stools, debility of memory and a great deal of pain in the glans penis.

On the 24th of February, 1885, he began to take the 3x dilution, 12 drops every 12 hours, and on the following day he experienced pain and irritation in the eyes, which became red, with a sensation as if there be sand between the lids and the ball of the eye. The ophthalmia was worse in the left eye; but both eyes became agglutinated during the night by the excessive secretion of the meibomian glands. After two days he felt pain in the larynx on reading and on laughing, and swelling of the left tonsil.

On the 28th he discontinued the experiment, getting slowly better of everything, except the diarrhœa. On the 2d of March he again took the 3x, with a reappearance of the ophthalmia. To cure the diarrhœa *Arsenic* 12 was insufficient, but it disappeared under Merc. sol.

Aranea Diadema.—Violent pains in the teeth of the upper and lower jaw *only* in the night, as soon as she lies down in bed and which continues for some time. *Grauvogl.*

A STUDY OF SANGUINARIA*.

Prof. Wm. E. Leonard, A. B., M. D. University of Minnesota at Minneapolis.

This drug, *Sanguinaria Canadensis*, the blood root, is closely allied to its botanical relatives, *Opium* and *Chelidonium*. It is indeed, a lesser opium, depressing the cerebral functions, causing stupor, irresistible desire to sleep, frightful dreams, while, like *Chelidonium*, it produces constant pain in the right hypochondrium and, later, a bright yellow, bilious stool, with, however, more nausea and vomiting than either of its relatives cause.

Its physiological action, in general, and from large doses, is upon the mucous membranes of the stomach and air passages where it produces irritation and inflammation. This irritant action evidently extends to the pneumogastric and causes derangement of the liver and digestive tract. But the study of this abnormal physiology, while of some use to the student in grouping medicines for study, is of little or no use in aiding his knowledge of their symptomatology. The moment one begins to catalogue the characteristic symptoms of a drug, its physiological action is forgotten.

For instance, with Sanguinaria, the followimg picture of the migraine, which it so often cures, is not made any more clear or more easily remembered by the foregoing statement as to its physiological action: the day of the sick headache, "The Typical *American* Sick Headache," may begin with irritability, "She could break things in pieces without cause;" or there is anxiety followed by bitter vomiting. There is often terrible vertigo on rising or turning the head quickly, with a rush of blood up into the head, whizzing in the ears and flushed face. The actual pain may begin without these preliminaries, as an aching on awaking in the morning; beginning in the occiput and spreading rapidly upwards, settles over the right eye; it increases with the day, being worse about noon and declining in the afternoon. Such periodical neuralgias are apt to be worse under Sanguinaria every seventh day (as under *Sabad*, *Silica* and *Sulphur*) and are accompanied by vomiting of bile, dread of light, motion or noise, and are relieved by sleep and a profuse flow of urine. The location of the pains may vary somewhat, occasionally the vertex, temples or the forehead, (always right side) being affected, but the constant and characteristic condition is the aggravation, increasing and ending with the daylight. Enlarged veins about

---

* Read before the Minnesota State Homœopathic Institute, May 1890.

the head and soreness of the scalp generally accompany the Sanguinaria conditions. The pains are like electric shocks, boring, tearing, or, more commonly, bursting.

Spigelia is worthy of comparison here as causing a similar headache, beginning at one point and radiating in different directions; generally worse upon the left side, and, like *Sanguinaria*, increasing and decreasing with the daylight. The pains of *Spigelia* are tearing, jerking and severe as in *Sanguinaria* and more apt to come on in stormy weather. *Iris Versicolor* and *Mellilotus* also cure similar severe nervous headaches.

Sanguinaria has a record in the cure of nasal polypus when accompanied with pain about the root of nose and frequent attacks of acrid, fluent coryza. It may then be used locally in a dry powder, dusted upon the parts and with the internal administration of potencies. In colds or during influenza, when there is much soreness in the roof of the mouth, extending to the pharynx, right side of throat and even down to the lungs, as if parts had been scalded or burnt, *Sanguinaria* is very apt to be the remedy. If, with the burnt feeling, there is rheumatic soreness of the muscles of the palate, much dryness down the air passages, loss of taste and smell, *Sanguinaria* is doubly well indicated.

With, or without, these catarrhal symptoms the cough which I have seen the *Sanguinaria* cure is a constant, dry hacking, from tickling behind the sternum, awakening from sleep.

Sanguinaria has also relieved œdema of the glottis, croup, aphonia and kindred troubles when the cough was dry, harsh and rasping, worse when lying down, with scanty, glairy expectorations, as in *Rumex*, *Spongia*, etc.

Its local action upon the air passages is the opposite of *Tartar Emetic*, *Stannum*, *Ipec.*, and like remedies, in that it dries up rather than promotes or increases the secretions.

Occasionally Sanguinaria is called for in *Pneumonia*. It is of the so-called typhoid or hypostatic form, sub-acute, and *the patient is always better when lying upon his back.* His face is livid and dark red (as in *Opium*), the hands show the engorged circulation by their enlarged veins; the cheeks especially show dusky red flushings and the pulse is full, soft, vibrating and easily compressed. Besides these, a strong indicating symptom is *a circumscribed burning in the chest*, commonly followed by heat through the abdomen and diarrhœa. The cough will be dry and teasing, with the characteristic dryness of the air passages, and tenacious rusty sputa. *Sanguinaria* most nearly resembles *Veratrum Viride* in the early stage of Pneumonia, the latter

remedy showing, perhaps, greater engorgement, a stronger but more intermittent pulse, and being better suited to such congestions of the lungs in children, than is *Sanguinaria*.

Later, in pulmonary phthisis, *Sanguinaria* is the remedy when the above circulatory disturbances are present with hectic, offensive breath and expectoration, weak pulse and frequent palpitation and, perhaps hemoptysis. Here *Phosphorus* is a very close analogue.

In females *Sanguinaria* is indicated in a metrorrhagia of black blood, with cough, sick headache, flushed face, etc., or an amenorrhœa with similar accompaniments, or, occasionally, as *Sulphur* or *Lachesis*, for the flushes at the climacteric, other indicating symptoms being present.

In rheumatism *Sanguinaria* meets those odd cases in which the *right shoulder and arm* are the parts affected, being worse at night in bed, like *Magnesium Carb.*

Its gastric symptoms are not as decided as those of its analogue *Chelidonium*, and from its exhibition in the nausea of pregnancy, and gastric ulcer, are found to be characteristically accompanied with heat rising up into the head and *relief of the nausea, etc,, from vomiting*.

This by no means exhausts the symptomatology of *Sanguinaria* but includes its leading and well authenticated uses.

Its most common form of use is in dilutions, made from the fresh American tincture of the root, or, as some prefer, triturations of the fresh root. I have found it just as efficacious in the 30th and 200th dilutions as lower, especially in neuralgias and cough.

This brief study shows that the Blood Root has a larger range than we are apt to accord it. If the profusion with which nature spreads the pure white petals of this beautiful early spring flower in our woods every year is an index of its general applicability, it should be an everyday remedy.

PHYSIOLOGICAL AND THERAPEUTIC ACTION OF STRYCHNINE ON THE CEREBRO-SPINAL SYSTEM.*

By J. Antonio Terry, M. D.

One of the best known drugs in the Homœopathic Mat. Med., is *Nux vom.*, and one also which is most extensively used by the practitioner; but its principal alcaloid, strychnine, is not often

*Read before "The Hom. Med. Society of the C. of N. York," April 10, 1890.

employed in spinal affections, for which it is a valuable therapeutic agent.

It is the main object of this paper to call attention to the sphere of action of Strychnia and to define its Homœopathic application in various diseases of the spinal cord, proceeding from the physiological to the clinical experience with the drug.

The experiments on animals and cases of poisoning in persons furnish ample field wherein to gather important data about the toxic and physiological effects of Strychnia, which, if considered in their totality, the resemblance to tetanus is quite striking and remarkable. When a lethal dose has been taken its rapid effect is soon followed by tetanic convulsions in which nearly all the voluntary muscles become engaged; the paroxysms, although intermittent, rapidly succeed each other, the mind remaining unaffected until death ensues by asphyxia or by exhaustion. During the convulsive paroxysms, general tonic convulsion occurs; the limbs are stiffened, the hands clinched, the toes and feet incurvated, the head is thrown backwards and the body is arched in an opisthotonic position. The muscles of respiration are fixed, the abdominal muscles are rigid and tense, strong erections of the penis with involuntary emissions of semen, urine, and fæces often take place. The countenance assumes a ghastly grin, *risus sardonicus*. Perfect quietness retards these paroxysms, and any slight external irritation, particularly unexpected, will reproduce the convulsive phenomena. These are the principal features that we all know are followed by an average poisonous dose of Strychnine; but when the quantity of the poison is too large, death supervenes very rapidly, and many of the described symptoms do not then take place.

The post-mortem researches have shown congestion of the cerebral and spinal meninges, together with dilatation of the vessels, and sanguineous extravasations in the gray matter of the spinal cord (medulla oblongata); but it is also at the seat of the motor functions belonging to the cord where the principal action of Strychnia is developed, although the irritability of the motor nerves is not destroyed, but simply exhausted by over-stimulation. This may also happen to the sensory nerves, if they do not remain unaffected.*

In that manner the reflex functions of the spinal cord are exalted, and the muscles through the irritation of the motor nerves

---

*Cl. Bernard stated that the sensibility of sensory nerves was destroyed, but after the motor functions had ceased. Busch, more recently, has supportedthe statement of Bernard. Strychnia either destroys or spares the excitability of both sensory or motor nerves, according to the size of the dose.

are fixed in a state of tonic contraction ; the irritability of their fibres, by over-stimulation of the cord and motor nerves, is exhausted, but the muscles preserve their contractility.

Not only Strychnia exalts the irritability of the reflex motor center, but it also stimulates the vaso-motor center or centers in the spinal cord. As it has been stated by Spitzka, "its vaso-motor effect is to increase the blood-pressure and the rapidity of the blood-current by contracting the arterioles ; this effect being independent of the central nervous system." However, a large dose of this poison will *paralyze* instead of stimulating the vaso-motor centers in the medulla, and prevent thus any rise of blood-pressure and other characteristic phenomena of the drug.

We also owe to Spitzka valuable observations on chronic poisoning by Strychnine, with the remarkable results of obtaining symptoms of a diseased cord, *partly from an insular selerosis, partly as an hæmorrhagic or non-hæmorrhagic myelitis.* The symptoms developed by chronic poisoning are: a diminution in the energy of the spasms, the occurrence of an ataxic state, with tremors and papillary myosis. It is obvious that the value of those experiments, considered from a homœopathic point of view, is one of great importance for the use of Strychnia in diseases of the spine, particularly myelitis, paralysis of spinal origin, progressive locomotor ataxia, etc.

If we turn our attention to the provings or symptoms of Nux Vomica in the homœopathic mat. med: we find in the department of the lower extremities striking symptoms, which are remarkably significant of spinal affections. For example: "Tottering and unsteadiness of the lower extremities; knocking under the knees; drags the feet." "Paralytic drawing in muscles of thighs and calves, painful on walking." "Numbness and deadness of the legs; cramps in the calves at night." (These symptoms are quoted from Cowperthwait; some appear as if clinical, others as if pathogenetic.)

In Allen's *Hand-Book* we may read: "Lower extremities." "Sudden sensation of holding back when walking, so that she must often stand still; with electric shocks in the legs." (These seem as the fulgurant pains of tabes dorsalis.) "Uneasiness in the legs before midnight, with an intolerable sensation (almost voluptuous, and agreeble) but preventing sleep, and forcing him to draw up and stretch out his legs." "*Paralytic drawing in muscles of thigh and calf, painful on walkimg.*" "*Tensive pain in calves.*" "*Spasmodic drawings.*" "Easy dislocation of ankle when walking, with giving way." "*Falling asleep of soles of feet* (*deadness*)." If we consider morever the stiffness of the neck and

muscles of back, with tearing pains; the dorso-lumbar pains and achings; the painful erections, of the paretic state of the rectum; the irritability of the neck of the bladder, and the great weariness and relaxation of the limbs after exercise, with loss of power, as leading symptoms of the physiological action of Nux Vomica and their relation to the developing diseases of the spinal cord, we must conclude that its homœopaticity is great.

An alcaloid has a more direct and intense action often than the original drug from which it is extracted or isolated, and it will be seen at a glance, in examining the toxicological and physiological effects of Strychnia and the pathogenetic of Nux Vomica the direct action manifested by Strychnia on the cerebro-spinal axis with exclusion of the vegetative system in which much of the action of Nux Vomica is diverted. This direct and exclusive afinity of Strychnia is very important, and it brings the drug to the foreground as one of the few and more conspicuous therapeutic agents to be preferred in treating diseases of the spinal system.

Let us now enter into the limited clinical field of Strychnia and examine its therapeutic application in that region called the cerebro-spinal system of nerves, the principal object of this paper.

Beginning with the old-school experience of the drug we find Strychnine recommended by Trousseau in paralysis agitans. Vulpian cured a well developed case of paralysis agitans in a man of fifty-nine years, who was already very weak and worn-out. The effect of Strychnia was kept up for four months; during that time the incontinence of urine and fæces ceased, the patient could feed himself, which he was unable to do previously, he got out of his chair, walked around, gained strength and asked to be discharged from the hospital. A slight trembling of the hands remained, but he could work and earn his living.

The morbid anatomy of paralysis agitans in the old is generally due to induration of the pons, medulla, or cervical portion of the cord. Recently, microscopic examinations have revealed blocking up of the central canal of the cord by increase of the epithelium of the ependyma and pigmentations of the ganglion cells. Also cortical sclerosis of the right lateral column of the cord and miliary changes in the white matter of the corpus striatum and hæmispheres.*

What were the real lesions in Vulpian's case, we do not know, but Strychnia undoubtedly cured homœopathically. The dose is not stated. If more extensive results have not been attained by the traditional school in the treatment of spinal affections

*Ross—Diseases of the Nervous Ssytem.

with this medicine, it is due to the comparatively large doses generally employed, which, causing aggravations, hampered the clinical issue.

The treatment of Chorea, recommended also by Trousseau, was followed by success in several cases, and Hammond called attention to its use, although in the last edition of his work on "Nervous Diseases," "he is not disposed to recommend it in view of the excellent results obtainable by the use of Arsenic, except in special cases, where the latter could not be tolerated."*

It is in these *special cases* where we will probably find a lesion of the cerebro-spinal system. Although we may consider Chorea as a functional neurose, there are undoubtedly cases where Dickinson found hæmorrhages into the substance of the nervous tissues, dilatation of the smaller vessels, and in chronic cases sclerotic changes in the course of the vessels. Other observers have found decided lesions of the cord, particularly in adults; the cervical and dorsal regions were usually more affected than the lumbar. Strychnia is very likely the remedy in those organic cases where the spine is the seat of the morbid process, and individualization to apply this medicine in such cases is, as necessary as with other maladies and drugs.

Let us consider now the disease which mostly resembles the toxic effects of Strychnia, namely, Tetanus. That the drug has been seldom but successfully employed by the old-school is clearly shown in a paper on Strychnia written by Hale and reproduced in his work on "New Remedies," 1875.† I have not been able to find any more clinical data of tetanus than those few cases cured in 1847 by Dr. Fell, of New York, with Strychnia, from one-eight to one-sixteenth of a grain for a dose.

When in the island of Cuba I attended a number of patients affected with idiopathic and traumatic tetanus; this last variety was treated, since my first case, with Strychnia 3c tritur.

I noticed very soon the specific action of the medicine with relations to tetanus, and decided success followed in the majority of instances, even when given up to die by the allopaths. My experience extended there for twelve years, and I claim that its use in the traumatic variety is attended with far better results than other medication. Some of those cases were published in a medical paper, "El Hahnemanniano" 1878 and 1879, where attention was called to the fact that I had been the first there to cure tetanus with Strychnia. In the spontaneous variety (tetanus a frigore), Aconite gave me better success than Strychnia,

*Hammond—"Diseases of the Nervous System."

†These are the cases cited by Dr. Stille in his Mat. Med.

particularly when unconsciousness was present, which is generally the rule in severe cases of idiopathic tetanus, and a marked contra-indication for Strychnia, which is best suited to those cases where the intellect is unimpaired and a clear cut or a punctured wound by nails or splinters, etc., has been the exciting cause in damp and wet weather. If tetanus develops on account of extensive laceration of the tissues, then Hypericum is a better remedy when Strychnia fails.

Michaud considers tetanus to be an acute inflammation of the gray tissues of the cord. Hammond says: "The spinal cord is both an organ for the generation of nerve force and for conducting impression to and from the brain. In tetanus it is the first-named function which is deranged, and this is shown by the great exaltation of reflex excitability which exists. Everything capable of causing a reflex movement of the slighest kind, and even excitation which in health would be altogether unperceived by the cord, augments the intrinsic action to a great extent where tetanus exists." "Now, we are able to produce a similar increase of reflex action by Strychnia," and I will add that its homœopaticity is beyond question, and that Strychnia in very small doses will cure more cases of traumatic tetanus than the other remedies recommended for it.

Dickinson, Fox, Allbut, Michaud, etc., found enlargement of the blood-vessels throughout the gray substance of the cord, with perivascular exudation, ruptures of the blood-vessels in many places, hæmorrhages, and granular disintegration. These pathological lesions of a hæmorrhagic myelitis correspond exactly with the experiments of Spitzka in slow poisoning with Strychnine and it is a conclusive proof of the relation that our remedies must bear with pathological conditions to be thoroughly and homœopathically indicated.

Before closing these remarks, allow me to relate two cases of spinal disease where Strychnia proved to be the curative agent and which brought health to the patients. I will refrain from entering into extensive details, fearing to make this paper too long and tax your kind attention.

A widow, about 46 years of age, came to see me with a spinal complaint, and with a diagnosis from other physicians of *Myelitis Spinalis*. Her history was that of having taken a severe cold a year past, after which she was confined in bed with severe pains in the back, fever, loss of sensibility of the dorso-lumbar muscles, formication in the legs, and paralytic feeling in the lower extremities. She was blistered, cupped and burnt with hot irons, but the disease passed into a chronic form.

Examination revealed pain and sensibility to pressure over the lumbo-dorsal region of the spine, aggravated by passing over a sponge with cold, iced water, sensibility diminished in the muscles of that region (anæsthesia), heaviness of the lower extremities with anæsthesia, numbness and formication, numbness of plantar surfaces, making locomotion uncertain, but not tottering, sensation as if a band constricted her waist, more to the right side, patellar reflexes somewhat diminished, and electric irritability of lumbar muscles more so. She could stand straight with her eyes closed and walk few steps without staggering.

The diagnosis of partial sub-acute myelitis was made and Strychnia, in granules of one milligram each, was prescribed. She took one granule before each meal, and reported at the end of the week that a slight improvement was noticed. Two granules were advised to be taken at each meal (four a day). The amelioration was very marked at the end of three weeks, and during the consecutive two months she was kept under the effect of Strychnia, two granules in the twenty-four hours. The final result was a return to health and the normal use of her limbs.

What tissue or tissues of the cord were affected in this case it is difficult to assure; but my impression was that the posterior columns, and perhaps the white and gray substances were involved in the morbid process. Whether there was sclerosis, softening, or *only chronic inflammation*, my opinion is that the therapeutic favorable result speaks more in favor of the latter, and that tissue disintegration had not extended very deeply.

One more case will end this paper. A medical student, about 26 years of age, dark complexion and short in stature, came to my office. On entering it he was exhausted after climbing slowly and with much difficulty a flight of stairs. He could not tell me what was the diagnosis from his professor, although he had asked, and the reason was obvious after I examined him and found symptoms like those of *Locomotor Ataxia*. The cause of his trouble could be traced to sexual excesses, and no syphilitic antecedents were found. He began some months previously to feel something wrong in his feet, loss of sensibility and as if pins or needles would stick him. The ground he felt was becoming softer until he thought he was treading on cotton, then his gait became irregular, he tottered and felt as if he would fall when walking if not fixing constantly his sight on the ground. Could not walk with his eyes closed, nor could stand straight without looking at his feet; patellar reflexes were abolished. These symptoms have been appearing gradually for the last twelve months, together with cramps, fulgurant pains,

like shocks, and other symptoms referable to marked disturbances in the functions of the spinal cord, very much like those produced in tabes dorsalis. His intellectual faculties were rather dull and clouded.

Strychnia, in granules of one milligram each, were prescribed, to take one at each meal (two a day). This treatment was kept up for two months, when the dose was reduced to one granule daily for another two months. Smoking, to which he has also been addicted, was stopped entirely, and sexual excitement or indulgence absolutely prohibited since the beginning of treatment.

The result was unexpected and most satisfactory. The patient gradually improved and was able at the end of the cure to resume his studies. You will notice, I said that symptoms were found *like* those of Locomotor Ataxia, and a doubt always remained in my mind as to whether the essential and real trouble was only *functional disturbances of the cord*, producing ataxia.

When we observed the rapid effect of the medicine in producing a permanent cure in four or five months, it is not likely that I should feel inclined to be positive in assuring that the lesions were those of posterior spinal sclerosis. The intellectual condition of the patient prevented a more accurate history of the case. His memory was impaired to a great extent.

Very likely if that condition of the spine would have been left unchecked, those, to all appearances functional disturbances, would have led probably in the course of time to a decided case of tabes dorsalis.

By the clinical results and the pathological conditions considered, we may come to the natural conclusions that Strychnia is one of the most important therapeutic agents for the treatment of spinal diseases. either acute or chronic, and that different tracks of the spinal medulla with its cervical portion are embraced in its sphere of curative and physiological action. The cures obtained in Chorea, Paralysis Agitans, Tetanus, Myelitis, Functional Ataxia, Infantile and Spinal Paralysis, proves that its clinical scope is not confined specially to a limited portion of the spinal axis or its tissues, and morever that it is a functional remedy as well as a medicine of value when tissue lesions are present.

Its superiority over Nux Vomica is evident when a direct and specific action upon the spinal tissues is necessary, and when combined with Phosphorus, (the Phosphate of Strychnia) it seems that its sphere of action is still enhanced. It is my opinion that we can rely implicitly upon this combination of drugs as one of the most effectual in disease of the crebro-spinal system.

The symptomatic indications which led me to prescribe Strychnia are very much like those of Nux Vomica, aside from the pathological lesion of myelitis, either acute or chronic, which it seems to cover specifically, particularly when the anterior or motor tract of the cord is more affected.

I fear I have detained you rather long, but before closing let me say, that useful lessons and valuable experience are often derived by analyzing clinical cases with regard to the physiological and therapeutic action of drugs in their relation to pathological changes or lesions.

If I have succeeded to accomplish this end to-night, although in a limited manner, I feel that time has not been lost. Let me thank you for the kind attention bestowed upon these humble thoughts of mine contained in this paper.

PASSIFLORA INCARNATA.

In calling attention to the *Passion Flower* and the doses in which I have given this remedy I may incur the condemnation of many of my brethren, especially those who are firm advocates of high potencies. I make the claim right here that *Passiflora Inc.*, is one of the few medicines that will not act satisfactorily in any other preparation than the tincture.

The following cases will show what a valuable remedy it is and the varied uses I have made of it:

On May 14, 1887, I was called to Mr. O., age 29. German. Machinist. Found him with the jaws firmly set, inability to take anything but liquid food, and even that was troublesome to give. Convulsive jerks, every two or three minutes, of first one set of muscles and then some other, with complete opisthotonos, so that the space between his back and the bed was large enough to pass a pillow under him without touching. He had been in this condition for over twelve hours without medical attendance.

The history of the case is summed up in few words: Ten days before my visit he had accidently run a rusty nail through his boot into his big toe, but the wound having bled considerably and carefully cleansed, he thought he had nothing to fear. The wound healed in three days and had been forgotton until I recalled it by inquiry.

Here was evidently a case of Tetanus and my prognosis was guarded. I immediately put him on *Passiflora*, five drops of the

tincture every two hours. In eight hours I again saw him; he was worse in every way. Increased the dose to twenty drops every two hours. In twelve hours after he was no better; increased dose to forty drops every three hours. The next day seemed to be improved as to tonic spasm, but otherwise same, except the temperature, which had now risen to 104°.

I again increased the dose and gave sixty drops of the remedy every three hours, with the result that general improvement followed and continued until the patient was discharged, on May 21.

After this experience with *Passiflora* I came to the conclusion that in order to get *immediate* results, the remedy must be given in appreciable doses, and the results have justified or bourne out my opinion.

In April, 1888, was called to an infant, 14 months, convulsions, caused by dentition, symptoms called for *Belladonna* of which the 1x dil., 5 drops in half a glass water, teaspoonful every 15 minutes until better, then once an hour. The child improved from start and the convulsions ceased in one hour from commencing the medicine. The next day child appeared in usual health and the *Belladonna* was given once in 8 hours and discharged from further attendance. Thirty-six hours after I was recalled, the child was in another spasm. No *Belladonna* symptoms being present I gave 5 drops of *Passiflora* tincture every 15 minutes with the results that it never had another spasm from that day to this. The child slept soundly all through the night and awoke the next morning in its usual good health.

Since then I have prescribed it for the sleeplessness of Dentition without a failure, giving it usually in from 5 to 10 drops a dose, to be repeated every 15 minutes until sleep. I never give it during the day for this purpose, but begin at bedtime.

In the Insomnia of adults, from whatsoever cause, I always give 60 drops at bedtime, and if not asleep in half an hour I give the same dose.

Experience has taught me that to give it in smaller doses is a waste of time and disappointing to the patient. Two such doses, i. e., 60 drops a dose, are almost absolutely sure of giving the patient a natural and refreshing sleep. The old school seem to have been forced to resort to "Sulfonal" (whatever that may be) as the *only* thing capable of producing sleep, and yet judging from reports in their journals it does not seem to "fill the bill." Were they to ever give this a trial we would not hear so much of Morphine, Chloral, Bromides, and the like.

I have never used *Passiflora* in Erysipelas, having always been able to discharge my patients in from two to four days by giving them *Jaborandi*.

In Neuralgia and Headache it has acted with wonderful rapidity, even the headache of Uterine displacements being brought under its influence. It is almost a daily occurrence to have people whom I never saw before come miles to my office for that "sleeping medicine made from the passion flower."

In conclusion let me say to the brethren, *try it*. But give it in appreciable doses. Don't be afraid of it. I would not hesitate to give it in four drachm doses, *if required*. But why give four when one will do?

C. A. WALTERS, M. D.,
111 Milton Street, Brooklyn.

P. S.—Since writing the foregoing I have used *Passiflora* in two cases of Delirium Tremens. It acted like a charm in both cases, sent them to sleep in half an hour, and when they awoke 12 and 14 hours after they were themselves again. 60 drops of tincture a dose, 2 doses in each C. A. W.

GILA MONSTER (HELODERMA HORRIDUS).

A Suggested Remedy for Paralysis Agitans and Locomotor Ataxia.

The following interesting letters from Chas. D. Belden, M.D., were addressed to Messrs. Boericke & Tafel, and explain themselves. We omit only paragraphs not bearing on the subject:

FIRST LETTER.

"At about this season of the year we hear much of the injury done by poisonous reptiles. In this section are several species of considerable repute. One genus is much talked of and is an exceedingly repulsive animal. It is the 'Gila Monster' (Gila is pronounced Hee-la). It is known as the *Heloderma Horridus* and by other names. Prof. Sir John Lubbock has written of it, an article appearing in the *Scientific American*:

"This animal does not bite frequently, but when it does it is understood that the result is a benumbing paralysis like to *paralysis agitans* or to *locomotor ataxia*. There is no tetanic phase—being, as I apprehend, a condition almost reverse in objective symptoms to Hydrocyanic Acid or Strychnia. These animals are about to open up for the hot season, in this similar to the rattlesnake, and a few have been captured lately. They are only found in this hot section of the desert in and near the Gila River, from which they take their name.

"I write you to inquire if you will give me any directions or suggestions as to obtaining some of the poison and preserving it and for its use afterward. Any suggestions will be gladly received. "Yours truly,

"CHAS. A. BELDEN.

"*Phœnix, Arizona, May 5, 1890.*"

SECOND LETTER.

"I am not confident that I shall make a success of an attempt to extract the poison from this venemous reptile. It appears that others have hunted for a poison bag or pouch and have failed to find it. The method attempted has been to irritate the animal sufficiently to cause it to spout a liquid upon a glass or porcelain dish.

"I am of the belief that you or your skilled agents can do this handling far better than I can, and the results will be far more satisfactory to the ordinary practitioner, such as I am. I have implicit confidence in your preparations, and prefer that I obtain this from the same source. You say you will gladly bear all expense in this matter. I can get a live animal and send it on by express or by freight. It will cost but a few dollars. I am afraid that the express company will refuse to carry it. If it must go by freight it may be a month on the trip. As it can live a long time on very little it may get through alive—but if not, then I will attempt to get the venom myself and send it on to you by express.

"I send you a couple of papers, *The Tuscon Citizen* and *The San Francisco Chronicle*, with a short article upon this subject which may be of interest to you. It seems to me that it (the poison) differs in so many points from all present known venoms that it is worth our having. In the first place it is alkaline and all other poisons of reptiles are acid. Second, its effect is not always sudden but is lasting—causing sickness for months and death even after a year. Again, although it does produce paralysis it is not the tonic spasm, but rather the slow creeping death from the extremities. It does not seem to excite but to depress. For these few facts I am not to be hailed as a '*Discoverer*' as you suggest. Please draw that part of it mildly. I am merely guiding attention toward what I have casually gleaned in a promiscuous way from the natives of this region. I will notify you when I ship the animal.

"Yours very truly,

"CHAS. D. BELDEN.

"*Phœnix, Arizona, May 21, 1890.*"

THIRD LETTER.

"After addressing my last letter to you I carefully boxed a fine specimen of the Gila Monster, *Heloderma Horridum*, or 'suspectum,' first in a tin box well perforated, and then in an enclosing wooden box also well perforated. But, notwithstanding the carefulness in packing, neither the express company, the U. S. Mail, nor the railroad company would permit the package to be received at their offices. I therefore will trust to the chance of inducing some traveler to carry it in his trunk if I find any such obliging friend. Yesterday I had an opportunity to work over three of the 'monsters.' My plan of operations was to catch one by a slip noose, hold him, and attempt to catch some of his saliva, in the hope that it might be impregnated with the poison. The mouth of the animal is quite dry. I held a watch glass with nippers firmly in and between the jaws; the animal broke a few of the glasses. But upon the thicker ones I obtained a few drops of a pasty yellowish fluid. It quickly dried upon glass. I sprinkled sugar of milk upon it to absorb it, and with a clean steel I removed it from the glass into two small vials, one containing alcohol, 95°, the other sugar of milk. I am certain you have at least 2 drops of the animal's mouth fluid, gathered as it was attempting to bite, in each of the vials. It may be that the quantity is three drops, but as I could not obtain it in such quantity as to drop it I cannot be accurate. I tested three animals. I would kill and dissect one if I believed it the better plan. Will you make any use of the enclosed or do you want me to go further and attempt more?

"Yours very truly,

"CHAS. D. BELDEN.

"*Phœnix, Arizona, May 29, 1890.*"

The following are the newspaper articles referred to in the letters:

"THE GILA MONSTER (*Heloderma suspectum*).

"In view of the accident which happened a few days ago to Hon. Walter L. Vail, through the bite of a Gila Monster, we publish to-day an extract of a paper written by our townsman, John A. Spring, and published in the April number of *Chambers' Journal* (London and Edinburgh), relative to the venomous nature of this mysterious lizard. Lack of space forbids us to reproduce the whole article.

"'The long-debated question as to the venomous nature of the Gila Monster, which the scientists have named *Heloderma horridum*, was brought up at a late meeting of the College of

black, blunt-headed lizard, about a foot in length, that rested upon a bed of sand in a small wooden box. It was the famous Gila Monster of Arizona, the only poisonous lizard in the world, and as ugly and disagreeable a looking creature as one could possibly imagine.

"The head was long and blunt, the eyes black and bead-like, the tail half the length of the body, thick-set and club-like. The entire body seemed encased in a thinly coated armor, marked curiously with yellow and black.

"The Gila Monster is sluggish and slow of movement, in this respect being entirely different from the tribe in general. In its own country the animal shows more activity, especially in the dry, hot regions contiguous to the Gila river. In confinement it has the habits of a young alligator more than anything else. The interest which centers in the Heloderma lies in the poison that is supposed to lurk in its bite, and perhaps no animal has given rise to so many weird and wholly imaginary stories.

"The natives and some ignorant whites suppose that its breath is poisonous. Others think to have one touch the body is a bad sign. The Heloderma is simply a lizard and the only one known that can poison other animals by its bite; a discovery made a few years ago by some naturalists who were traveling through the country. The story was not at first believed, but several were sent East where the poisonous properties were soon demonstrated. A naturalist at the Smithsonian was bitten, the poison taking effect so quickly that he had barely time to call for help. Small animals soon died after being bitten, and it was shown that human beings, under certain conditions, might easily die from the effects of the bite.

"The poison of the Heloderma has been carefully examined by Messrs. Mitchell and Reichert, the experts, who announce that the physiological action of the poison is entirely different from that of snakes. The latter destroys life by paralyzing the respiratory center, while the poison of the Heloderma at once attacks and affects the heart, paralyzing it.

"Among the interesting experiments that of injecting the poison subcutaneously has been tried. There was no local effect, the heart being at once affected, slowly contracting, the spinal cord finally becoming paralyzed.

"It is probable that the condition of the victim or his general health would have much to do with the question of death. If a man was in a poor condition and run down he would possibly die, while a healthy man would not be seriously troubled.

"Specimens sent to Europe were experimented upon by Sir

John Lubbock. A frog bitten by the lizard died in a few seconds in convulsions. A guinea pig bitten in the hind leg passed away in three minutes, and other animals died equally as quick, creating in the minds of the observers a decided respect. If the teeth of the specimen at the Nadeau House are examined they will be found to have curious fissures, and a further and closer look into the mouth of the monster will show at the base of the grooves small dents from which the poisonous saliva flows. The Heloderma is an interesting creature, and while not always sure death, it is well to keep it at a distance and handle it with the care and respect due its unsavory reputation."—*Los Angeles Tribune.*

PICKINGS FROM PENNSYLVANIA.

The Transactions of the Twenty-fifth Session of the Homœopathic Medical Soeiety make a volume of 320 pages. The frontispiece is a portrait of Dr. W. B. Trites, since deceased, who was President of the Society at the time of this meeting.

What answer shall be made, asked Dr. Trites in his annual address, to the charge that the Homœopathic medical profession are abandoning the teachings of Hahnemann? The answer: "I hear it swell from your hearts: 'The experiences of these years have confirmed our belief in the truth of the law and proven the efficacy of small doses.' This is the answer we of Pennsylvania make to the slanderous charges that the Homœopathists of to-day have deserted the teachings of Hahneman." Again: "The fact that we represent a system which, if generally adopted, would make life both more enjoyable and safer, should inspire every true disciple to renewed energy in the work of spreading the truth." The President also urged the importance of every Homœopathic physician joining a State society. The subject of medical legislation was also treated very fully, and it was shown that Homœopaths must be up and doing if they wish to retain their liberty.

In his paper on Herpes Zoster, Dr. Trites said the occurrence of several cases about the same time had led some dermatologists to class the disease as infectious, but "so far as my own observations have gone I am inclined to the belief that the disease is due to atmospheric conditions." From the paper, and discussion, *Rhus tox.*, seems to be the remedy oftenest called for by

herpes, though *Ranunculus bul.*, *Aresen*, *Mezereum*, *Staph.*, and *Rhododendron* are at times indicated.

Dr. G. Maxwell Christine drew a sad and gloomy picture of the terrible increase of abortion: "Whether chastity is becoming less a virtue among single women," he said, "I cannot aver, but that among this class abortions are now more the habit than formerly can be attested by any physician of much experience. Even among the married there are few wives who do not know of some means to destroy the fœtus before it comes to full term, and who have not at some time applied one or more of these means in their own cases. The abortionist lucratively plies his or her trade in nearly every town and hamlet, and is rarely interfered with. Aside from the higher point of view the physical evil from abortion is most lasting and direful. 'No matter how carefully applied and observed the treatment after abortion, no woman ever fully recovers the natural tone of her womb.'" Dr. A. W. Chandler, he said, a physician of twenty-five years' experience, maintains "that more than one-half of the human family dies before it is born, and that probably three-fourths of these premature deaths are the direct or indirect result of abortion by intent." Dr. Christine thought that the aid of legistators should be invoked, and read a paper on the subject from J. B. Scattergood, Esq., a member of the Philadelphia bar. In the discussion which followed Dr. Betz said that he always notified the coroner when he was called upon to treat a woman suffering from the effects of abortion, but that official only moves when the woman dies under the operation.

Dr. E. R. Snader very effectually exploded the famous "red line along the gums as a diagnostic sign of phthisis pulmonalis." In a long array of cases in the Hahnemann Hospital he showed that "the line was observed twice in non-phthisical to once in phthisical patients. He demonstrated very conclusively that the line is due to improper care of the teeth; to the "excessive accumulation of tartar, or to the general systemic bone and tissue relaxation (past or present), of which the red line is simply a local manifestation." Dr. Johnston confirmed this by what a dentist (Dr. Coolidge) had told him on the subject, namely, that the line was "due to an accumulation of tartar."

Dr. Bartlett read a paper on "some forms of œdema not dependent upon disease of the heart, loin or kidneys." He described one case of a lady attacked suddenly with a severe headache, swelling of the entire body, and high fever; afterwards feeling extremely sore as if bruised, extremely sensitive to the touch, with urine scanty but with heavy deposit of urates.

Apis ix was prescribed, and in a few days the patient was well. In the discussion, Dr. Mohr related a case to illustrate the extreme care a physician should use. The patient came under his care fully persuaded that he must die. *Lachesis* was prescribed to the symptom, "extreme sensitiveness of the neck to pressure." For ten days the case was closely watched, and Dr. Mohr became convinced that the extreme œdema of the lower extremities, present in the case, was due to the fact that the patient had not changed his sitting posture for months. *Sac. lac.*, and persuading him to lie down effected a cure in a month. Dr. Harriet J. Sartain reported a case of a boy with marked œdema of the upper lip, but no other symptom. *Bovista* cured.

Dr. W. J. Martin related some cases proving the superiority of homœopathic over pathological prescribing. One was a man who vomited blood in large black lumps; pale, weak, with deathly nausea. A few doses of *Ipecac*, 200 cured. Diarrhœa followed; *Arsenic*, 12 completely cured, sickness due to whiskey. In another bad whiskey case the patient repeatedly vomited blood of the same character as preceding, but with no nausea; he craved whiskey and water but the guiding symptom was "the patient exhibited no alarm or anxiety concerning the hæmorrhages." *Hamamelis*, 10 drops in water, a teaspoonful every hour with cracked ice *ad lib.*, cured. He also related two cases of cholera morbus; one, a woman, pains in the bowels, diarrhœa, vomiting, cold as a corpse and covered with sweat, and the added unique feature of being completely crazy, all pointed to *Veratrum alb*, and it quickly cured. The other case was a man who, after drinking ice water felt as though a stone lay on his stomach, followed by severe pain in the bowels and diarrhœa; he took sundry patent medicines which were quickly vomited up; very thirsty, but drink vomited up at once; not perspiring, but skin dry and warm; *Arsenicum* promptly cured.

Dr. E. C. Parsons read a paper on Typho-Malarial fever, demonstrating from clinical cases the importance of *Potassium phosphate* in enteric fevers with malarial complications, or *vica versa*. In one of these cases the Allopathic doctor who had "opened" it, as the lawyers would say, finally pronounced it fatal; the Homœopath closed the case by curing it with *Potassium phos.*

Dr. W. A. Haman's paper was on a singular physiological fact and one which, the Doctor thinks, Jack the Ripper may be acquainted with. He went with his friend, Dr. Marks, to see a patient suffering from mania-a-potu; when they entered the hotel room three porters were desperately struggling with the maniac; Dr. Marks walked to the bedside and placed his hand on the an-

terior cervical region of the patient, whereupon he immediately fell over and apparently slept, but in reality was unconscious. This lasted two or three minutes, during which he did not move. He then opened his eyes, appeared dazed for a moment and was then immediately perfectly rational. Dr. Marks called me aside and explained the mystery. He had placed the palmar surface of the distal surface of his right thumb upon the upper rings of the trachea, a sudden firm but momentary pressure, with the immediate results described. The mania returned and Dr. Haman found that by this means he could control the man as easily as a child. Dr. Marks said he had often had recourse to this means for controlling excessive violence and had never observed any evil after effect from it.

Dr. Mohr's paper on ovarian tumors did not claim that they could be cured by medicines, but simply gave two cases in which they appeared to be cured; one by *Apis*. In the discussion Drs. Betz and Sartain thought that such tumors could not be cured by medicine, while Drs. Jones, Skeels and Burgher inclined to the belief that they could, and cited cases from their own practice where they apparently had been cured. The remedies quoted were *Apis*, *Arsenicum*, *Calcarea*, *Magnesia phos.*, and *Calcarea iodatum*.

From "The Year's Work" compiled by Dr. J. Richey Horner, we take the following points:

"For varicose veins of pregnancy, *Vipera* 3x."

"For a case of diabetes mellitus—urine free, dark brown, cramps in the calves of the legs, rapid and excessive emaciation *Caprum met.*, 8x was given, and was followed by rapid improvement."

"A catarrhal condition, commencing in the nose and extending rapidly to the throat, larynx and trachea, calls for *Arum triphyl.*

"A case of a scrofulous child, weak and illy developed, blue veins, thick neck, large head, with profuse sweating, resisted all remedies in the ordinary potencies, but became rapidly stronger and better under *Calc. carb.* 50^{m}."

In his paper on "Diphtheria," Dr. Chandler Weaver said, "You cannot let up on the medicine in this disease on the first improvement as in most other diseases; you have to keep up repeating the remedy until the throat is nearly healed up, or the membrane will recommence growing, and your patient will become worse."

Dr. C. A. Wilson reported a bad case of epilepsy that yielded to *Œnanthe croc.*

In his paper on Enuresis, Dr. John Cooper mentioned, among many other remedies our old friend *Mullein Oil*. "This is the latest remedy for enuresis and difficult urination. It is of undoubted value." Dr. Martin thought that *Sulphur* would cure nearly all cases of enuresis in children, and Dr. Mohr endorsed him.

In his paper on the Eye, Dr. J. B. Sullivan mentioned *Symphitum* "as very valuable for all injuries of the eye resulting from external violence. Therefore, if the infant's eyes be bruised or injured by the obstetrician, *Symph.* might be tried with benefit." The θ in water as a lotion and 3x internally soon cured a young man's eyes injured by a base ball.

There were many other interesting papers, but more in the specialist's domain.

THE SPARE HOUR. NO. 4.

A Glimpse of an Alchemist.

On the evening of Wednesday, the 3d of September, 1651, Oliver Cromwell led his army to the last conflict of the civil war —the battle of Worcester, "as stiff a contest, for four or five hours, as I have ever seen." At 10 o'clock that night though "so weary, and scarce able to write," he nevertheless did send to Speaker Lenthall a brief account of his victory, "a very glorious mercy." And while he wrote, the fields on both sides of the Severn were dabbled in clotted blood, and the moon shone on fourteen thousand men that nevermore should look upon her face. On rode the trooper through the night, and the groans of the wounded and dying grew fainter and fainter in the distance, and on the Saturday the spires of London greeted his sight, and the weary horse was spurred for a final effort, and the letter is in the Speaker's hands, is read in Parliament, and all London is at once ablaze; bells ringing, people shouting, hats flung in the air; one universal delirium of delight; and on the banks of the Severn fourteen thousand fellow-men insensate, cold and stark.

Into the shop of *Richard Cotes*, *Printer*, burst a breathless apprentice with the tidings. Down went composing sticks, and out went the men, Richard Cotes himself not the last to reach the door. He soon returned, and addressed a grave-looking gentleman in a long black gown. "Pardon, good doctor, but we can toil no more to-day; the bells of St. Clement Danis are

pealing a holiday, and not a varlet will be back." "Aye, take the sheets with theè, and welcome."

John French, "Dr. of Physick" left the shop bearing with him a "page proof" of several sheets of his "Art of Distillation, or a Treatise of the choicest Spagyricall Preparations, etc., etc., etc., etc. I say "etc." because the whole title-page contains 119 words, delectably printed by the cunning of Richard Cotes, in black and red. It was honest printing work, for after nearly two-and-a-half centuries the colors are fresh though time has made the paper dingy.

From Dr. French's "Epistle Dedicatory," I think he was glad for an excuse to leave the shop of Richard Cotes and join in the "generall" rejoicing. He dedicates his book "To the Right Honorable Philip Earl of Pembrook and Montgomery." This nobleman was the son of that other Philip Earl of Pembrook and Montgomery whom, at his death, Oliver Cromwell succeeded as Chancellor of Oxford University—a zealous Parliamentarian who declared "the Commonwealth Great Seal as good as any King's ever was."

Dr. French assures his noble patron, "as long as I have sense or reason, I shall improve them to the honor of art, especially that of Alchymie. In the perfection thereof there are riches, honor, health, and length of days; by it *Artesius* lived 1000 years, *Flammell* built 28 hospitals with large revenues to them, besides churches and chapels," etc.

"In the perfection of this art, I mean the accomplishing of the Elixir, is the sulphur of philosophers set at liberty, which gratifies the releasers thereof with 3 kingdoms, viz., vegetable, Animal and Mineral, and what cannot they do, and how honorable are they that have the command of these? They may command Lead into Gold, dying plants into fruitfulness, the sick into health, old age into youth, darkness into light, and what not?"

A fervid believer was Dr. John French; one delightful to meet in these days of scoffing unfaith in everything. How *naive* is the illimitable "and what not" with which he classes his category of splendid impossibilities. How calm he is withal; it is no mirage that is deluding him; right before his noonday vision shines the El Dorado of which he writes, and the next fire in his furnace may find him "accomplishing of the Elixer"—then shall he turn his old age into youth, "and what not?"

And how he exalts his calling—as every honest workman should and *will:* "This Art of Alchemy is that *Solary* art which is more noble than all the other six arts and sciences, and if it

did once throughly* shine forth out of the clouds whereby it is eclipsed, it would darken all the rest (as the Sun doth the other six planets) or rather swallow up their light. This is that true naturall philosophy which most accurately anatomizeth nature & natural things, & occularly demonstrates the principles & operations of them. That empty natural philosophy which is read in Vniversities is scarce the meanest handmaid to this Queen of arts." [Ah, Dr. John French, by that token, across two-and-a-half centuries, we can smell the sack in thy breath. Thou art vaporing, John, like a coffee-house wit.] "It is pity there is such great encouragement for many empty and unprofitable arts, and none for this and such like ingenuities, which if promoted would render a Vniversity far more flourishing than the former. I once read or heard of a famous Vniversity beyond sea that was faln into decay, through what cause I know not; but there was a general counsel held by the learned, how to restore it to its primitive glory. The *Medicine* at last agreed upon was the promoting of Alchymie, and encouraging the artists themselves. But I never expect to see such rationall actings in this nation, till shadows vanish, substances flourish, and truth prevail: which time I hope is at hand."

Thou dear old 17th century optimist, that time is not yet "at hand," nor are there any now so simple as to hope for it. Our electric lights make the shadows darker than ever, semblances are still flourishing, and truth could not prevail though the devil died to-morrow. Yet are we all shadows that vanish—as thou hast, as the great Oliver did in that night of storm, as the fourteen thousand on the banks of the Severn at Worcester. Just *beyond* the vanishing point truth does at last PREVAIL—a fact to be forgotten at the soul's peril. O spark imperishable that once wast "Dr. John French," would that thou couldst speak!

Our dead and vanished author, although a graduate of Oxford, was duly modest; he felt a diffidence in putting forth his book; "when I considered what a multitude of Artists there are in this Nation, from which more and better things might be expected than from myself, I was at a *nonplus* in my resolutions, fearing it might be accounted an unpardonable presumption in me to undertrke that which might be better performed by others. But for the avoidance of this aspersion, be pleased to understand that I present not this to the world under any other notion than of a rough draught (which indeed is the work of the more unskillful, and therefore of myselfe without exception), to be pol-

*An error in proof-reading due solely to the exciting news of the battle of Worcester!

ished by the more expert Artist. I rejoice, as at the break of the day after a long tedious night, to see how this solary art of Alchymie begins for to shine forth out of the clouds of reproach, which it hath a long time undeservedly layen under. There are two things which have a long time eclipsed it, viz., the mists of ignorance, and the specious lunary body of deceit." [Thanks, honest John, for a felicitous phrase—*the specious lunary body of deceit!* It is of no use to open our Webster or Worcester; there is no sap in "lunary" as *they* understand it; they cannot tell us what a splendid *periphrasis* for the D——— lies curled up in thy phrase like an oak in an acorn. We have lost sight of the special meaning, John, but we have got the thing itself improved by 250 years of added experience.]

In a day when the *Zeitgeist* had taught men the grand secret that "kings had a *lith* in their necks," as Boswell's father phrased it, we should expect a revolt against authority *merely as authority*; an assertion of the right of individual research and of independent thought. The Cromwellian spirit cut off more than king Charles' head; it severed servile bonds far more than it knew. Let us return to Dr. French's text to see how this is exemplified. "If men did beleeve what this *Art* [of Alchymy] could effect, and what variety there is in it, they would bee no longer straighten by, nor bound up to *Jurare in verba Galeni vel Aristotelis*, but would now subscribe a new engagement* to be true and faithfull to the principles of *Hermes* and *Paracelsus*, as they stand established without *Aristotle* their prince, and *Galen* and *Hippocrates*, their lords and masters. They would no longer stand dreaming forth, *Sic dicit Galenus*, but *Ipse dixit Hermes*. I desire not to be mistaken as if I did deny *Galen* his due, or *Hippocrates* what is his right, for indeed they wrot excellently in many things, and deserved well thereby; That which I cannot allow of in them is their strict observation of the quadruplicity of humours (which in the schools of *Paracelsus*, and writings of *Helmont*, where the anatomy of humours hath been most rationally and fully discussed, hath been sufficiently confuted) and their confining themselves to such crude medicines, which are more fit to be put into Spagyricall vessels for further digestion, then into mens bodies to be fermented therein."

There is the spirit that protests against authority merely as such. A graduate, who had subscribed to be true and faithful to the principles of Hippocrates and Galen, begins to think for himself, and then he is no longer bound by the *Sic dicit* of another.

---

* Alluding to a college oath sworn on being graduated.

Dr. John French was a mental vertebrate—a species very seldom found in medical colleges, unless as a dried specimen that, unhappily, doesn't lecture!

We get an inkling of how slight a knowledge of the capabilities of chemistry obtained in our dead alchemist's days from his assertion that he knew "divers that will not beleeve that common quicksilver can of itselfe be turned wholly into a transparent water [a dissolved bichloride], or that glasse can be reduced into sand and salt of which it was made, saying that *fusio vitrificatoria est ultimo fusio*, or that an hearb may be made to grow in two hours, and the Idea of a plant to appear in a glasse, as if the very plant itselfe were there, and this from the essence thereof, and such like preparations as these."

Our good doctor waxes warm in defence of "the Elixir"—that every true disciple of Hermes, was ever and always to uphold and defend. Here follows the testament of John French's discipleship:

"And for the possibility of the Elixir, you shall as-soon* perswade to beleeve they know nothing (which is very hard, nay an impossible thing to doe) than to beleeve the possibility thereof. If there be any such thing (say they) why are not the possessors thereof infinitely rich, famous, doe many miracles and cures, and live long? These objections, especially some of them, scarcely deserve an answer; [Ah, John, no dodging, no affected contempt; it is an *argumentum ad rem*, and you must grapple for life or death. Observe the smile of calm self-possession on his face as he goes on, undismayed] yet shall I to shew the vanity of them make some reply thereunto. Did not *Artesius* by the help of this medicine live 1,000 years? Did not *Flammell* build fourteene Hospitals in *Paris*, besides as many in *Boleigne*, besides churches and chapels with large revenews to them all? Did not [Roger] *Bacon* doe many miracles? and *Paracelsus* many miraculous cures?" [Four plump knock-downs straight from the shoulder, thinks our honest John.]

Moreover, to possess the secret of "the Elixir" was not without its peculiar peril, and our good doctor becomes actually radiant in showing this: "what saith *Sandivogius*? I have, saith he, incurred more dangers and difficulties by discovering myselfe to have this secret, than ever I had profit by it, and whomsoever I would discover myselfe to the great Ones, it always redounded to my prejudice and danger. Can a man that carrieth alwaies about him 10,000 pounds worth of jewels and gold,

*After many years' reading in curious English texts I have never elsewhere seen this form of as-soon.

traveled every where up and downe, safe, and not be robbed? Have not many rich money-mongers been tortured into a confession where their money was concealed? Did you never heare of a vapouring fellow in *London*, that pretended to the knowledge of this mystery, was on a suddaine caught aside by money-thirsters, and by them tormented with tortures little lesse than those of hell, being forced thereby (if he had knowne it) into a discovery of it? To say nothing of being in danger of being subjected and enslaved to the pleasure of Princes, and of becoming instrumentall to their luxury, and tyranny, as also being deprived of all liberty, as once *Raimundus Sullius*."

Verily, Dr. John French, thou hast more than reconciled me to the drudgery of visits at $1.50—*collect if you can*! Yet, O John, I would like to try a little of the "torture" that befalls "money-mongers" just for a change.

John French's last volley at the "vanity" of these scoffers is a rain of red hot cannon balls, as witness: "The truth is, the greatest matter that Philosophers aime at, is the enjoyment of themselves, for which cause they have sequestered themselves from the world, and become *Hermites:* Well therefore and like a philosopher spake *Sandivogius* when he said, Beleeve me, if I were not a man of that state and condition that I am of, nothing would be more pleasant to me then a solitary life, or with *Diogenes* to live hid under a tub; for I see all things in this world to be but vanity, and that deceit and covetousnesse prevails much, that all things are vendible, [O John, was the market *so* full even in thy day?] and that vice doth excel vertue. [Ah, John, wipe your spectacles! 'Vice doth excel vertue?' Only when the devil is weighmaster, and that is not yet.] I see the better things of the life to come before mine eyes. I rejoice in these."

Thus lifted up and strengthened by Sandivogius the good John çontinues, *in propria persona*. "Now I doe not wonder, as before I did, why Philosophers when they have attained this medicine [the Elixir] have not cared to have their daies shortened (although by the virtue of their medicine they could have prolonged them) for every Philosopher hath the life to come so cleerly set before his eyes as thy face is seen in a glasse." [That, O John, is indeed the "Elixir," the divine "projection"—Jerusalem the golden shining into the eyes through all the dust and din of Vanity Fair.]

With one fell swoop Dr. French descends from the celestial to the terrestrial. One would even imagine that he had in mind those latter-day pharmacists who strain their slender wits to

cheapen tinctures and triturations! He says: "There is another sort of men by whom this Art hath been much scandalized, and they indeed have brought a great Odium upon it by carrying about, and vending their whites, and reds, their sophisticated oils, and Salts, their dangerous and ill prepared *Turbithes*, and *Aurum vitæs*. And indeed it were worth while, and I might doe good service for the Nation, to discover their cheats, as their sophisticating of Chymical oils with spirit of Turpentine, and salts with salt extracted out of any wood-ashes, and such like, but here is not place for so large a discourse as this would amount to. I shal only at this time relate to you how *Penotus* was cheated with a sophisticated Oil of gold, for saith he I gave 24 duckets for the processe of an *Aurum potabile* which was much cryed up and magnified at *Prague*, but at last it proved to be nothing but a mixture of oil of Camphine, Cloves, Fennel-seed, and of Vitrial tinged with leaves of Gold. I know I shall incurre the displeasure of some, but they are sophisticating, cheating mountebanks, who indeed deserve to be bound to keep the peace, because many men, I dare swear, through their means go in danger of their lives. But better it is that their knavery should be detected, than a noble Art through their villany be clouded and aspersed."

So wrote Dr. John French in 1651, but the breed of "sophisticating, cheating mountebanks" flourished, for two centuries later England's poet laureate in scourging his day said:

> "While another is cheating the sick of a few last gasps, as he sits
> To pestle a poison'd poison behind his crimson lights."

[This paper has already overran the limits of the *Spare Hour*, and yet it was purposed to have given some curious preparations of Gold, and a list of its "vertues" as taught by Dr. French. This would supplement Dr. Burnett's pleasant little book on Gold, and its uses, and also furnish some empirical evidence of the truth underlying our applications of this remedy.

To give this paper something of a practical value let me quote a passage that defends Dr. Swan's much-abused remedy, *Luna*. I give a *bona fide* quotation from Dr. French's 141st page.—

"TO EXTRACT A WHITE MILKIE SUBSTANCE FROM THE RAIES OF THE MOONE."

"Take a concave glasse and hold it against the Moone when she s at the full in a clear evening, and let the raies thereof being nited fall upon a sponge, and the sponge will be full of a cold Milkie substance, which you may presse out with your hand, nd gather more.

"*De-La-Brosse* is of opinion that this substance is of the sub-

stance of the Moone: but I cannot assent to him in that, only this I say, if this experiment were well prosecuted, it might produce, for ought I know, such a discovery which might bee the key to no small secrets."

S. A. J.

SELECTIONS AND TRANSLATIONS.

Allium Sativum in Rabies.—In the "*Revista Homeopatica de Barcelona*" of February last, formerly called *El Consultor Homeopatico*, we read the following: "We have received a 24 page pamphlet from our colleague, Dr. Terreira Monthino, of Lisbon, in which he reports several cases of hydrophobia cured by the tincture of *Allium Sativum*, and through which he offers his services to the government of his country, compromising himself to cure as many cases as may present themselves, and treat them under the rigorous inspection of a critical committee appointed to that effect. Besides the above remedy, he also employs in the treatment of rabies: Bell., Hyosc., Canth., Stram., Xanthium, Spinosa, etc.

Saw Palmetto.—The *Saw Palmetto*, says Goss, acts "much like the hypophosphites, or the tinct. of oats. But in addition to this very marked tonic and nutrient action, it has a special affinity for the glands of the generative organs of men, and also for the reproductive organs of females. It is a good vitalizer, directly increasing the action of the secretory organs of the male, and promoting the activity of the ovaries of women, and the testes and prostrate gland of men. In the wasting of the testes after mumps, or of old masturbators, or in those cases that follow varicocele, or those cases connected with impotency. In females, it may be often used with success to promote the growth or development of the mammæ, where they develop slowly. And atrophy of the ovaries will be much relieved by the regular use of this article, if continued several months. And, as a remedy for chronic enlargement of the prostate glands, I have found this a very positive remedy. This is a very common affection among old men, and gives them much trouble, causing almost constant desire to urinate in the day, and causing them to have to get up frequently at night, breaking their rest. For this very annoying disease, the saw palmetto is one of our most trust-

worthy remedies. Even in cases of prostatic enlargement and irritation from improperly treated gonorrhœa, the extract of the fruit of palmetto seldom fails to give speedy results. I have not failed to relieve any case of difficult and painful micturation from enlarged prostate gland; and in cases of dribbling of urine, from want of force in the bladder, this is a positive remedy. And in sexual debility—from excess or from debility—this remedy gives quick relief. It invigorates the nervous system generally, and allays irritation of all the mucous surfaces, especially those of the nose and throat. It is a valuable remedy in chronic bronchitis, and a fine tonic in *phthisis pulmonalis.*" Like *Passiflora* it should be given in large doses to get the best effect.

Solanum Carolinense, (Called Horse Nettle, Tread-Soft).—This is one of an extensive family of plants, many of which are medicinal. This variety is a common pest about the farm in this country. It grows in fields and about the lots and road sides, and has sharp prickles along the stalk, stems and mid-ribs of the leaves, so as to be very much in the way in the harvest field, and in the grass and clover fields. But some recent investigations by physicians are confirming the assertions of the non-professional, and proving this plant to be one of our most efficient remedies in convulsions, epilepsy and catalepsy. It is also regarded as a very soothing remedy in coughs of winter and spring, if prepared in the form of a syrup.

In the transactions of the medical association of South Carolina, for 1889, Dr. J. L. Napier, of Blenheim, S. C., says that during the summer of 1887 he had read of horse nettle and heard of it having been used among the negroes for fits and epilepsy. To test it, he used it in the case of a woman who had epilepsy most of her life. During the menstrual flow she was generally in an epileptic condition. And after trying various remedies for her condition without success, he gave her horse-nettle, steeped in whiskey; a tablespoonful three times a day for several months. The third day after commencing its use she was threatened with a convulsion, but has not had any sign of the disease since. He states that he has used it in four other cases with marked benefit. In two cases there had been no return of convulsions. And he used it in the case of a dwarfed, ill-formed child, that had had epilepsy all its life. Some time previous the child had had typhoid fever from which he had not recovered, but went into decline. Its convulsions became harder and oftener, having repeated attacks in the day and night. He tried the bromides,

but they had no effect whatever. Finally he put the child upon the tincture of horse-nettle, and after that it never had any more convulsions. He also states that he used it in the case of a pregnant woman successfully, who had convulsions in this state. He also found it beneficial in hysterical convulsions in a woman who had the attacks at her menstrual periods.

Dr. Francis Peyer Porcher, of Charleston, S. C., in his work entitled "Southern Fields and Farms," details some cases of tetanus treated by this remedy. Dr. Valentine gave the juice of five or six berries, increasing the dose daily, but did not have sufficient amount to fully test it in tetanus. Professor Porcher says that it is used by the negroes in South Carolina as an aphrodisiac. It has considerable reputation among the people in Georgia, as a cough remedy, in the form of a syrup.—*Dr. Goss in Virginia Medical Monthly.*

Amygdalus Persica.—Some ten years ago I had a little patient whose principle difficulty seemed to be an inability to retain anything whatever upon its stomach. It would vomit up promptly everything I gave it, and I had given it everything I had ever heard of and also had eminent council, but it was no go; I was literally at my rope's end. At this juncture an elderly lady neighbor, one of "the good old mothers," timidly suggested an infusion of peach bark. Well, as it was any port in a storm, I started to find the coveted bark, which I was fortunate enough to procure after a long tramp through the country and two feet of snow. I prepared an infusion, gave the little patient a few swallows, and presto! the deed was done, the child cured. * * It fills all the indications of the leaves and many more. It fills the indications of hydrocyanic acid, ingluvin, ipecac or any other anti-emetic. It will more frequently allay the vomiting of pregnancy than any remedy I have ever tried. And nearly every case of retching or vomiting (except it be reflex) will promptly yield under its use. * * * For an adult the dose is five drops, and in urgent cases repeat every five to ten minutes until the symptoms subside, after which give it at intervals of one to four hours as indicated. After ten years use I am thoroughly convinced that any physician once giving it a thorough trial will never again be without it. Of course, it is not a specific for all "upheavals of the inner man," but will I think meet more indications than any other known remedy of its class.—*C. C. Edson, M. D., in Chicago Medical Times.*

Rhus Tox. Corners of mouth ulcerated and sore.—RAUE.

CORRESPONDENCE.

SKOOKUM CHUCK AND ECZEMA.

To THE HOMŒOPATHIC RECORDER:

The following bit of successful experience with "Skookum Chuck" may possibly interest some of the readers of the HOMŒOPATHIC RECORDER.

Mrs. X. had, for several years, an eczematous eruption upon the dorsal surfaces of the fingers. There were several small patches upon the back of each hand. The skin of the affected areas was dry, red, and scaly. There were shallow fissures, and a slight serous exudation. The subjective symptoms were: Itching, slight smarting and a feeling of stiffness upon moving the fingers.

The modalities were: Worse in cold weather and worse from washing hands. The lady was under treatment for some months, during which time a number of remedies were prescribed for her general symptoms including those of the skin.

Her health improved much, but the eczema remained the same.

She was therefore put upon the 2x trituration of *Skookum Chuck* (B. & T.) and the *Skookum Chuck Cerate* applied externally each evening before retiring.

One month of this treatment cured her.

OLIVER S. HAINES, M. D.

Philadelphia, Pa.

MOBILE, MAY 8, 1890.

EDITOR RECORDER:

Dear Sir:—Please state again in your journal that as the law now stands in Alabama any one who has a diploma from a regularly chartered college can practice here if he will have his diploma recorded in the office of the Judge of Probate in the county where he intends to practice. But those who contemplate moving to Alabama had better do so before November next, as the Legislature will meet then and the Allopaths will make every effort to patch up their infamous laws.

Very truly yours,

GEORGE G. LYON, M. D.

Nux Vom. Awakes at 3 A.M., lies awake for hours, with a rush of thoughts, falls asleep with the bright morning with troublesome dreams, and gets up more tired than in the evening. —HAHNEMANN.

VETERINARY DEPARTMENT.

Ringbone.—Dr. Moore highly recommends a liniment consisting of 60 grains of *Mercurius Corrosivus* dissolved in one pint of hot water as an external treatment for the reduction of splints, bone-spavins and ringbones. Rub the parts affected night and morning with this liniment and at the same time administer 10 drops of the 6th dil. of *Mer. Cor.* internally.

During the first or inflammatory stage of ringbone, when the animal is evidently suffering every time the joint is moved, and the parts are exceedingly hot, tender, and more or less swollen, the arteries throbbing violently, as may not uncommonly occur after a sudden rick or sprain of the joint, the development of ringbone may be entirely prevented by the internal and external application of *Aconite*. To one part of the tincture of *Aconite* add six parts of water, saturate a linen rag and bind it round the parts, keeping continually moist until inflammation subsides, giving *Aconite* internally at the same time.

Erysipelas.—On January 20 I was called to a one-year-old filly which was afflicted with erysipelas of the face to such a degree that both eyes were nearly closed by the puffed up eyelids, respiration through the nostrils, likewise swelled, was much impeded. Two doses of two drops each of Apis 3d, on a small wafer, cured within 24 hours.—*Dr. C. Bohm, Berlin.*

Hoarseness in a Canary.—Mrs. Z. requested me to prescribe for her pet canary, which seemed to be very hoarse since several days. Found the little patient sitting with ruffled feathers on his perch, head low; seemed to have lost his voice altogether. Causticum 3; three pellets dissolved in the drinking water cured him within three days.

Leucorrhœa in a Mare.—A white mare æt. 5 years in the beginning of March was in heat, but was not taken to the stallion, and about April 1st a yellowish thick secretion was discharged from the vagina, the membranes of the pudenda had a yellowish-white color and were relaxed and wrinkled. Whenever her flanks were touched she assayed to urinate but only a small quantity of seemingly normal urine is voided followed by a slimy fluid accompanied by lively motions of the clitoris. On receiving *Cannabis* 1st twice daily the discharge ceased after 5 days, and as she became heated she was taken to the stallion whom she readily accepted. But after a few days this same discharge recommenced for which she then received drop doses of Sabina,

when after a few days she was cured and had no recurrence of these symptoms since then.—*Dr. Boebm, Veterinarian. Pop. Zeitschr. für Hom. Vol. IV.*

Spasmodic Lameness in Dogs.—A fine New Foundland dog saved the little brother of its owner, who had broken through the ice, from drowning, by jumping in after him and holding him above water, by a supreme effort, until both were rescued by means of ladders and boards. But, while the boy seemed none the worse for his icy bath, the dog sickened and evidently was in pain. He would drag himself along, taking little notice of any one, even though petted. Four or five times daily he was beset by cramps, always when moving about; the dog would then stand still and wince, his hind legs would twitch, and he would alternately raise one then the other. The embrocations and liniments of the veterinarian proving of no avail. *Belladonna* and then *Cocculus* were administered, but the hoped-for relief did not come. The dog was failing fast when at last *Nux vom.* 3 was administered, one dose a day, and after eight doses the dog was cured, barring a slight lameness. In other respects the dog is in as good spirits and as healthy as before.

—*Pop. Zeitschr., für Hom.*

BOOK NOTICES.

Boeninghausen's Therapeutic Pocket Book: New Edition. Edited by T. F. Allen, M. D.

It gives us real pleasure to be able to announce that this valuable book, so long expected, is in press and will be ready for delivery by September. Boeninghausen's works are all classical but none has come so near to the daily life of the practitioner and proved so constant and reliable a companion as the *Therapeutic Pocket Book.* It unravels, analyses, and systematizes the maze of Symptomatology and enables the physician to find readily the indicated remedy in any given case in the shortest and simplest manner. It is the only repertory that is a key to the whole Materia Medica, unlocking its treasures and making them available for practical application. In this new edition, Dr. Allen has added the large number of remedies that have been introduced since the days of Boeninghausen and thus brought the book up to date, adhering strictly however to the admirable and thoroughly practical arrangement of the original. The book will be a complete repertory and yet not too large to be carried in the pocket, which form still further adds to its usefulness.

The Homœopathic Treatment of Alcoholism: By Dr. Gallavardin, of Lyons, France. Translated by I. D. Foulon, A. M., M. D., L. L. B. Hahnemann Pub. House. Philadelphia, 1890. Cloth. 138 pages. $1.00.

Here is something new under the sun, and if others can do what Dr. Gallavardin has done, and is doing, it means that another flower of Homœopathy has burst into bloom and will soon bear fruit for the healing of ills hitherto deemed incurable, save by the afflicted one's "moral" force which, it is needless to say, is an element usually remarkable for its inertness. Dr. Monin voices the Allopaths when he says of alcoholism that "the desire for drink is a kind of mental perversion beyond the rational resources of morals and medicine." Dr. Gallavardin puts it that "Hitherto Homœopathic medicine has proved itself quite as unable to cure drunkenness because, with rare exceptions, Homœopathic physicians, not knowing how to utilize the wealth of their materia medica, have failed to follow these two precepts of their master, Hahnemann." The two precepts are given, and the doctor says that by obeying them "I have been able to cure inebriates of their vice in one-half of my cases," when not hereditary. Differential indications of fourteen remedies "which clinical experience has proved to be efficacious against inebrity" are given in full, and also much valuable matter relative to the nature and effects of the various drinks. Here is a picture of the *Pulsatilla* patient: "People who imagine they strengthen their stomachs by drinking, and whose digestive organs are really insufficient. Sad while they are drunk. Desire for cider. Chlorotic women and girls, who drink for the purpose of gaining strength. Jealous, and still more envious, inclined to hate. Spendthrifts through ostentation. Timid, even cowardly." That picture is drawn by a master hand. The book will be found to be fascinating reading and one that will amply repay the time devoted to it. It is a book that broadens the mind.

A Dictionary of Domestic Medicine: Giving a Description of Diseases, Directions for their General Management and Homœopathic Treatment with a Special Section on Diseases of Infants. By John H. Clarke, M. D. Keene & Ashwell, London. Boericke & Tafel, New York. 1890. 291 pages. Cloth. $1.25.

This new claimant in domestic medicine is printed with good type on the fine and clean white paper that seems to be peculiarly English. The author says of it: "Many non-medical readers of the *Prescriber* having requested me to bring out a more

popular and elementary work on the same lines of arrangement, I have used such leisure moments as I could find during a number of years in preparing such a work, and the present volume is the result." In the preparation of the *Dictionary* "Dr. Constantine Hering's *Domestic Physician*, the most original of domestic treatises, and the author's *Prescriber* are the works which have been most largely used." Physicians desiring to recommend a well written, reliable and compact work should bear this one in mind.

Philosophy in Homœopahthy: Addressed to the Medical Profession and to the General Reader. Charles S. Mack, M. D. Gross & Delbridge. Chicago. 1890. 174 pages. Cloth. $1.25.

A little work, made up of eight papers, dealing with the philosophy of Homœopathy, and an appendix concerning the New Church, or Swedenborgian, view of Homœopathy. One of the papers consists of an essay, which is a revision of an earlier pamphlet by Dr. Mack, appearing originally under the title, *Similia Similibus Curantur*. "A medical man is (or should be)," says Dr. Mack, "because of his education and experience, better able than his patient to apply principles in medical practice, and to judge of evidence in medical questions; but education, experience and evidence are not *reason*, and as to the *reasonableness* of theories upon which practice is based the patient may be as competent to judge as is his physician." *Philosophy* in *Homœopathy* appeals to the reason only.

A Cyclopædia of Drug Pathogenesy. Part XII.

This part embraces from page 577 to 760 inclusive, completing the article on *Phosphorus* carried over from Part XI., and ending with Sabadilla. The editors say: "With this volume we begin to see the end of our task. As far as we can estimate, Vol. XIII. will not only complete our alphabetical series of drugs, but will leave space for the Index." Three volumes are now complete and, bound in half morocco, cost $7.00 per volume, or in paper $1.50 per number.

How to Preserve Health: Louis Barkan, M. D. New York, 1890. American News Co. Cloth. 338 pages. $1.00.

This book seems to be an effort at furnishing the laity of "regular" pursuasion with something analagous to the Homœopathic family books or "domestic physicians," but when compared with any of these it seems rather barren. It contains much good advice on sanitary matters. Some statements are open to discussion and others of a rather self-evident character; among the latter we may mention, as a sample, the proposition that "good bread will not have a sour taste." The description

of "prime wheat flour" answers well to what might be given of flour that is the most difficult to sell "on 'change" because of its inferiority. Dr. Barkan is not afraid to commend good wines and beer, but is a little skittish about ice and says: "When cold water is craved (although cold water really interferes with digestion), it should be boiled and filtered and cooled in bottles on ice." What is the use of advice of this sort? No one will take trouble to follow it, and then boiled water is about the flattest thing a man can drink. We will take our bacteria raw rather than in soup form—if we must take them. The reviewer's private notion is that it is within the bounds of possibility that the bacteria or microbe hunters may do more harm to the patient than their infinitesimal game. But after the worst is said Dr. Barkan's book contains a great amount of valuable matter, and it is written in an interesting style.

Skookum Chuck.—The fame of Dr. Gentry's *Skookum Chuck* takes an ever widening circle. The Chicago *News* quotes a Boston paper to this effect: "Twenty-five years ago a Frenchman crossed the continent with a large flock of sheep, says a correspondent of the Boston *Pilot*. He lost great numbers while moving through the arid region, and when he arrived in Washington the sheep that still lived were covered with various skin diseases. One evening as he was preparing for an encampment he got a glimpse, through the woods, of a beautiful lake, and he hastened forward to its shores. The sheep rushed into the water and began to drink copiously. He was still more astonished when he tasted the water and found it bitter and disagreeable, as well as dissimilar to anything he had ever tasted. Fearing the sheep would be poisoned he drove them out of the water, but in spite of his efforts they returned again. The sheep were in such a condition from disease that he had small hope of their recovery, so he ended by allowing them to drink what he believed to be the poisonous waters as plentifully as they would. Next day he could not drive the sheep away from the vicinity of the lake, and in a few days more he was utterly astonished to find that his sheep were restored to a wonderfully healthy condition." Needless to add that this lake is the lake whence comes *Skookum Chuck*.

Sarsaparilla. Mercurial affections of the head are often wonderfully relievd by Sarsaparilla.—NEIDHARD.

Calc. Carb. When a horse is overdriven and doesn't eat.

Hepar. Preferable after the abuse of mercurial or other metallic preparations.—HERING.

Homœopathic Recorder.

PUBLISHED BI-MONTHLY BY

BOERICKE & TAFEL,

1011 Arch Street, Philadelphia, Pa.
9 North Queen Street, Lancaster, Pa.

SUBSCRIPTION, $1.00 PER ANNUM.

Address communications, books, etc., for the Editor to E. P. Anshutz, P. O. Box 921, Philadelphia, Pa.

"*Bellis perennis*," remarked a well-known physician, not long ago, "is the best remedy we have for the mental, moral and physical ills that result from the practice of masturbation." This remark set us to rummaging among the books but only in the *Cyclopædia of Drug Pathogenesy* is much said about this remedy. There about two pages are devoted to it. In three provers boils, pimples, and "many little boils with mattery heads" resulted; none had been subject to these before. Many of the symptoms seem to confirm the remark quoted above. "Brain getting muddled." "Giddiness." "Looks haggard and careworn." "Sight dim." "Heart flutters; is quite out of patience with everybody and everything." "Tongue coated with yellowish fur." "Mind confused and memory getting weak." "Spirits getting dull; cannot tolerate noise, music disagreeable," and many other symptoms. The true *Bellis perennis*, needless perhaps to remark, is an imported tincture.

PROFESSOR WILLIAM JAMES, of Harvard University, Cambridge, Mass., requests of the RECORDER "the publicity of your pages to aid me in procuring co-operation in a scientific investigation for which I am responsible? I refer to the *Census of Hallucinations*, which was begun several years ago by the "Society for Psychical Research," and of which the International Congress of Experimental Psychology at Paris, last summer, assumed the future responsibility, naming a committee in each country to carry on the work." If any one cares to assist in this work the Professor will be most happy to supply blanks on application. Here is a rare chance for having your hallucinations scientifically classified and ticketed which will be very comforting. The work is one requiring an unusual degree of skill, as the average man with an hallucination is so cock-sure that his isn't a hallucination at all, that it will require a high order of ability to smoke him out. What is the Professor to do with the hallucination of the man who knows it all, or of him who thinks he can sing and

cannot, not to mention ten thousand others? This, of course, is taking the word in one of its subordinate meanings; but take it in the sense of "seeing" things; is it not begging the whole question to class unexplainable sights as "hallucinations?" After all who knows but that the "snakes" certain convivial gentlemen at times see are not after all more real, as they surely are more terrifying, than the tangible snake which can be killed with a blow? There may be more in a lively "hallucination" than professors dream of.

THE *Journal of Homœopathics*, 40 pages, monthly, $5.00 per annum has concluded not to die and No. 1, Vol. II., comes up smiling and pugnacious. "It is the ambition of the editor to make the Journal the best Medical Journal in the world, but in order to do so, it is essential that each Homœopathician shall give his or her aid by sending papers for publication." In this the editor is open to the charge of plagiarism, at least it seems to us that we have read something very like this before. He claims the reward offered by the *Homœopathic Physician* for a journal purporting to be Homœopathic which is not "prostituting the fair name of Homœopathy for the sake of a few dollars," and goes to the length, not of offering to bet a new hat, but of giving one to the *H. P.* men, if their journal can show as clean a Homœopathic bill of health as his. He also pays his respects to the *Medical Advance* and asks if the dropping of one of the "o"s from the word Homœopathy is an indication that it is "tending still further away from Homœopathy pure and simple?" Dr. Conrad Wesselhoeft gets a slash as also Dr. T. F. Allen, but there has been so much hacking and hewing lately that we are becoming callous. We welcome the revived comrade but warn him that there are some heavy hitters on the Homœopathic literary nines, and that sometimes even a renowned pitcher (in) has been knocked out of the box. (Remember kindly reader that it is mid-summer and the national game's vocabulary is in the air).

Sanicula Marilandica (*Canadisher Sanikel*), or Blacksnake root, is a very old remedy, mentioned in all the dispensatories, that has been popular among the people as a remedy for intermittent fever, chorea and sore throat for many years. It has never been proved, and, we believe, is not mentioned in any of the Homœopathic materia medicas; nevertheless, there is a small demand for it and it may be had at most of the Homœopathic pharmacies, which, for the accommodation of the medical profession, accumulate many an odd tincture or trituration that are not proved. Among

the comparatively new remedies in Homœopathy is the *Sanicula* introduced by Dr. Gundlach; it is the water of a mineral spring in Illinois, and may be obtained in potencies of the water or in triturations of the salts of the evaporated waters. A correspondent of the *Homœopathic Physician* (June) seems to think he has discovered a great mare's nest because a doctor seeking for the *Sanicula* of the spring was able to buy a "novel 'mother tincture' (of a mineral water!)." Afterwards he found, "by reference to the books," that it was, "indeed, a '*Sanicula*,' but the *Sanicula Marilandica* vulgarly known as snake root." This is quite accurate, but hardly news to any well informed pharmacist or physician who has a knack of keeping informed on these outside and rather obscure medicines.

ONE OF THE REMEDIES mentioned the *Encyclopedia* is *Euphorbia Lathyris* and it may now be obtained at the pharmacies. This is all that is said about it in the work named: "*Eye.* Brilliant eyes (after five hours). Staring look. Pupils dilated, with wide open eyes. *Face.* Deadly pale. *Stomach.* Retching and vomiting. Suddenly seized with violent vomiting and bloody stools. *Abdomen.* Abdomen drawn inward. *Stool.* Copious, frequent. *Pulse.* Pulse small, irregular. *General Symptoms.* Whole body stiff, icy cold. Uneasiness (after five hours). *Fever.* Skin burning hot (after five hours). Glowing hot cheeks after five hours." This, we believe, is all that is said about it in the books.

IN THE PREFACE to his work on *Leucorrhœa*, Dr. A. M. Cushing says, well and truly: "Study, learn, prescribe. If low dilutions fail you, don't be afraid to go up." After reading the very interesting paper published in this number of the RECORDER, which Dr. Ghosh sends us from far away India, one realizes that there seem to be times when the reverse of Dr. Cushing's formula is the proper course to pursue; when high preparations of an indicated remedy fail don't be afraid to *come down*. The cures Dr. Ghosh made with *Aurum* 2 x are very striking.

IN HIS paper read before the Ill. Hom. Med. Association, May 15, and printed in *Medical Era*, on the "Treatment of Carcinoma," Dr. J. S. Mitchell says: "Most of my cases have been best treated with the 2x trituration *Arsenicum*. For disinfecting and dressing purposes I use carbolized oil, one part carbolic acid to twenty parts of linseed oil. Inasmuch as the purity of carbolic acid is essential, it is well to use Declat's nascent phenic acid. Cleanse the ulcer first with the carbolized oil, then dust on a portion of the *Arsenicum* trituration, enough to lightly cover the

part. The quantity to be used varies. The susceptibility to *Arsenic* is very great in some patients and they bear only a very minute application, others will tolerate a large quantity of the 2x One physician writes me that a patient of his was unable to bear even the fifth trituration locally. Be careful in making the application to carry the powder well to the edge of the ulcer. After dusting on the powder cover with a layer of gauze, moistened with carbolized oil. Over this place a wad of absorbent cotton and hold in place with rubber adhesive strips; apply once or twice daily; if patient is sensitive make daily application only in the morning. I usually prefer to dust the powder on the surface to be treated, but you will find in some situations it will be better to put the powder on a piece of gauze moistened with carbolized oil." Also: "While pursuing the local treatment give internally *Arsenicum*, notably 3x trituration, and other indicated remedies, for internal treatment is even more favorable at times than those already cognizant of its value fully realize. Give *Arsenicum* for periods of a week or ten days, also as high as the 6x and 30x."

OUR ESTEEMED contemporary, "New Remedies" casting about for these has found one, advocated by a Los Angeles midwife, who says "that in cases of retained after-birth of abortion a sure cure is to have the patient sit over a chamber in which an old hat has been burned." If this "sure cure" does as all other sure cures do, fails, the readers of "New Remedies" might try on the following. Pull the hair from the tip of the tail of a black Thomas cat at midnight in the full of the moon and wear it in the left stocking. This cure was *never* known to fail. (It hasn't been tried yet.)

SOME YEARS AGO Dr. Neidbard made the remark that a desire for bacon or fat ham was an indication for Calc. phos. A one-year-old boy was under my treatment all last summer for summer complaint, and I had much trouble to keep him alive. After a time Hydrocephaloid complicated the case, the body became cold and respiration was scarcely perceptible, even after soft stools fainting spells would follow. Phos. 200 acted marvellously but a relapse after three weeks only partly yielded to Phos., while Arsenicum seemed to give new life. Soon after on one of my visits I found the little patient with a piece of raw bacon in his little fingers greedily tearing at it with its small teeth. This recalled Dr. Neidbard's remarks to my memory. I gave the child Calc. phos., and from that time convalescence progressed uninterruptedly.—*Dr. Bruckner in Populaere Hom. Zeitung.*

THE
HOMŒOPATHIC RECORDER.

VOL. V. PHILADELPHIA AND LANCASTER, SEPT., 1890. NO. 5.

A PROVING OF PARAFFINE.

Translated by W. F. Robinson.

(The following proving was made by Dr. Wahle, of Germany, who was the chemist of the great Hahnemann. He never published it, but gave the manuscript to his son, who in his turn gave it to Dr. Held, now a practising physician in Rome. Dr. Held at the request of his colleagues translated it into Italian and it appeared in the medical journal *L'Omiopatia in Italia*, from which this article is translated and slightly condensed. The remedy is used by the Homœopaths of Rome and found to be valuable in uterine and other troubles, indicated by the proving. It is particularly serviceable in constipation.)

Proving of Paraffine.

HEAD.

Weight in the head.

Head heavy and stupid.

Bruised feeling in the left side of the occiput.

Knocking and hammering in the head as if all the pulses were beating.

Head heavy and dull; a feeling when leaning forward as if a weight fell toward the forehead.

Pulsation in the head.

Pressing pain in the head, extending from the vertex toward the forehead as if something would come out.

Pricking, stinging in the head, extending to the left temporal bone.

Pain as of a contusion in occiput.

At 9 o'clock in the morning there comes a pain in the left side of the vertex as if a nail were being driven into the head, with extension of the pain to the left lower jaw.

Touching the left side of the head causes pain as if the part were crushed and a feeling as if the whole side of the head were soft and spongy.

Twisting and wrenching in the sinciput so that he must lie down; having lain down a quarter of an hour, and having placed the right hand under the head, there was experienced a feeling of painless shock so that the hand under the head was drawn away and the legs were thrown down from the sofa. Soon afterward occurred severe palpitation of the heart.

Twisting and wrenching in the whole head, as well as the face.

Feeling as of knife stabs under the right temporal bone extending into the right eye and becoming worse on bending over.

On the outside of the forehead a pressing pain which seems to thrust inward, passing, in half an hour into the inside of the head.

Painful pulsation in the forehead which gradually disappears when lying down but becomes worse when bending over.

The left side of the head and face suffer most; pains stinging and twisting, often going and returning at the same time.

Twisting in the left side of the head and face; the teeth of the same side ache as if they would fall out.

On touching the vertex the skin pains as if it were suppurating, in the afternoon.

Sticking in the forehead extending into the nose.

The skin of the head feels soft on being touched or as if suppuration was going on underneath it.

Falling out of the hair.

EYES.

Throbbing and sticking over the right eye-brow laterally and from without, extending into the lower jaw and there disappearing.

Stinging pains above the left eye and toward the temple.

Raised spots upon the cornea.

The eyes seems as if there was a veil before them in the morning.

In the morning the eyelids are closed with mucous; dry mucous in the internal angles of the eyes.

Itching in the internal angles of the eyes which ceases a moment on rubbing but a sore pain remains and very soon the itching returns again.

Pressing pains under the right upper eyelids as if some foreign body had gotten in.

Pain under the upper eyelids as if from the prick of a needle.

The eyelids are red, as after crying.

Pain as of a wound in the external angle of the left eye, in the morning.

Itching of the eyelids, lasting the whole day. Rubbing relieves only for a short time.

A feeling in the eyes.as if they had fat in them.

A feeling in the eyes as if they were always moist.

Eyes moist and tearful.

The mucous in the internal angles of the eyes is cold and viscid.

Lachrymation and itching of the eyes in the morning on rising.

In the morning the left eye is closed with mucous and seems to have a veil before it.

A veil before the eyes or they feel as if they contained fat observed on rubbing the eyes.

The eyes are dim, she sees nothing, but feels everything; has sensation as if all the limits were numb for five minutes toward evening.

The eyes are pale; things seem to be seen through a veil. Little black flies are seen before the eyes.

Short vision on account of the many little black flies before the eyes.

On fixing any object for some time, the eyes become moist, as if a cold wind was blowing into them, with a gentle itching.

In the open air there seems to be a black veil before the eyes; objects seen seem to be pale, with short vision.

She sees objects as if in a mist.

The white of the eye is full of blood; worse toward the external angle.

FACE.

Itching in the face as from urticaria, smooth red spots come out on the face.

EAR.

Roaring in the right ear like the rumbling of a mill wheel, in the afternoon.

Gurgling in the left ear like the beating of the pulse.

Ringing in both ears, in the morning.

Stinging and twisting in the left ear with a feeling as if it was stopped up.

If she thrusts inside with the handles of anything then the feeling of stoppage ceases, but returns again in a short time.

The odor of cordials is perceived.

The nose is moist and there is frequent desire to blow it, but without sneezing.

Blood from the nose of a dark red color.

TEETH.

Tearing in the teeth on the right side of the jaw, extending to the ear on the same side. It is not relieved until support is given to the painful cheek.

Stabbing pain in one of the left lower molar teeth.

Twisting in the teeth with stinging in the ear which after some hours affects the whole left side of the head and face, down to the lower jaw.

Twisting pain in the lower teeth of the left side, affecting also the temporal region, sleep is rendered thereby impossible.

MOUTH AND THROAT.

In the evening there appeared under the upper lip, upon the gum, a hard painless tumor which broke of itself during the night.

Mouth full of saliva; she was obliged to spit constantly, lasting for twenty-four hours.

Voice hollow and harsh.

Mouth feels sticky.

Dryness of the throat, the fauces are as if they were dried up but without thirst.

Sense of suffocation in the pharynx.

The mouth is without taste and the appetite fails.

Bitter taste in the mouth.

Tongue slightly coated; dirty-white in color; chill, followed by dry heat with thirist, which is soon followed by sweat, lasting a long time.

STOMACH.

Acid eructations some hours after eating.

A constant feeling of satiety.

Appetite good but nothing seems to taste as it should.

Inclination to vomit at 9 o'clock in the evening.

After eating, repeated urging to vomit with expulsion of the ingested food.

Disturbance of the stomach with increase of saliva in the mouth as if emesis must occur with stinging pains in the forehead and cold over the whole body, without thirst or feeling of heat following.

Hunger almost all the time.

Pain across the stomach as if a blow had been received.

The pain persists even after thirty-six hours.

On account of the severe pain in the stomach can only breathe slowly and carefully.

The pains in the stomach extend to the chest, causing op-

pression thereof and then pass into the shoulders, with much belching, and alternating pains in the throat and in the spine.

Great sensibility of the stomach; cannot draw the vest together.

In walking, a feeling of relaxation in the region of the stomach as if there was a sore in it which was causing pain.

Smoking soon causes pain in the stomach and tobacco is distasteful.

Pain as if from a beating in the region of the stomach; she wished to gape and was obliged to support the region of the stomach with the hand, thereupon arose a fixed pain in the left hypochrondrium as if some of the parts were being twisted.

Chill, heat and sweat, frequently alternating. The stomach swells up like a ball and forces itself upwards; hard and very painful to the touch; there is also very little appetite.

When the pains in the stomach subside, those in the teeth also disappear as if there was a causal relation between the two.

Weight in the stomach as if there was a stone placed upon it, in the morning, evening and after dinner during the time of digestion, that is from half an hour to an hour after meals.

Sometimes there occurs palpitation of the heart in connection with these stomach symptoms, so severe that he is often incapacitated from doing anything whatever.

After breakfast, between 9 and 10 o'clock, griping and drawing with crawling in the stomach, which extends into the chest and between the shoulders, causing oppression of the chest with a sense of heat.

The face and hands become hot and red and there is hot sweat upon the upper part of the body, especially upon the forehead.

ABDOMEN.

Sense of lassitude in the abdomen which grows less when the parts are supported.

Swelling of the abdomen and nausea as if about to vomit.

Feeling in the abdomen as if he had been disembowled; he wishes to walk fast which causes the parts to pain severely.

Cutting pains in the abdomen so that he was unable to sleep the whole night.

In the morning at 9 o'clock, colicky pains in the abdomen which ceased after some minutes and a quantity of white mucous issued from the vagina; these attacks are often repeated.

Under the umbilicus, a cutting pain as if caused by a sharp knife, extending downward to the genitals.

Colicky pains for some hours internal to the umbilicus with a

painful sensation as if a cord was bound around the abdomen above the stomach, lasting ten minutes.

A griping sensation in the region of the umbilicus extending to the spine.

When sitting, spasmodic pains in the lower portion of the abdomen extending into the rectum and coccyx. After long sitting the pains are relieved but walking makes them worse so that the body must be held in a slightly curved position.

Toward six in the afternoon, griping and cutting internal to the umbilicus with nausea, afterward vomiting of acid water and at the end a little food, with twisting pains in the vertex and temples; dryness of the mouth with much thirst.

Wrenching pains in the calves extending into the toes and preventing sleep the whole night; she does not know where to put her legs.

At 10 o'clock in the evening without having supped, the abdomen suddenly swelled as if she had eaten to excess; before and during the attack flat and viscid taste in the mouth. She went to bed in this condition and on waking in the morning, the attack was entirely gone, the bowels, however, refused to move.

Painless swelling of the abdomen lasting twenty-four hours.

Abdomen hard, tense and swollen with painless rumblings unaccompanied with belching of wind; he goes to bed with these symptoms but they are gone in the morning.

However, there remains a constrictive pain below the ribs, passing across the stomach with much thirst. Five hours later there occurred alvine discharges, the first was very hard with much tenesmus, so that the whole abdomen was retracted; the last discharges were fluid, abundant and without tenesmus, in consequence of which the swelling of the abdomen went down a little.

The pains disappear, however, with redness of the face, alternating with cold sweat.

Standing and walking soon bring back the symptoms again.

Pressing the arm against the stomach and squeezing it relieved the pain and then she was able to breath deeply, which she could not do otherwise.

Stomach swollen in the afternoon; went to bed at 10 o'clock and slept one hour, awoke with urging to vomit and soon after threw up acid water and the food taken the preceding day.

Griping in the abdomen, extending down into the rectum with a feeling as if this organ was ligated; she feels so weak that she has to support herself to keep from falling, with cold sweat in the face, lasting half an hour.

Severe itching in the abdomen which ceases and is always followed by copious white expectoration, with flashes of heat in the face and great weakness.

At first coldness in the feet, then stinging and pressing pains in the right hypochrondrium. From here the pains pass to the stomach with swelling of the abdomen; then they extend up the spine to the shoulders.

Spasmodic stabbing pains, one after the other, in the Mons Veneris, when standing on her feet she has a desire to put one foot over the other.

A spasmodic pain in the left inguinal region as of incarcerated wind, which extends upward across the abdomen, causing a painful spot in the region of the spleen.

STOOL.

Bowels confined for two days and very hard; the evacuation occurs in small pieces.

No evacuation for three days, the abdomen seems very full, as if much had been eaten, with loss of appetite.

Evacuations accompanied with stinging, cutting pains in the rectum which persist more than an hour, with vehement tenesmus.

Obstinate constipation in children is readily cured.

The child has a movement only once in three or four days, accompanied with severe pain in the anus.

Frequent desire for stool without result.

Stools hard but occurring every day.

After going for three days without stool he is obliged to remain an hour before expelling anything and becomes very much fatigued.

Evacuations hard as nuts expelled with much difficulty, with spasmodic pains in the intestines; the feces escape in small pieces.

Chronic constipation with hemorrhoids and continual urging to stool without result.

URINARY ORGANS, ETC.

Often passes much urine.

Frequent desire to pass urine after cramps in the stomach.

Was obliged to urinate three times in the space of four hours, but only a small quantity each time; otherwise she only urinated once during the same length of time and with strangury.

Urine very hot and light colored.

Passes much urine and after a quarter of an hour passes an equally large quantity although she had drunk but little.

Slight itching and burning in the vulva when not urinating.
Feeling of heat in the vulva.
Very hot urine causing heat at the vulva.
Very hot urine with burning pain at the vulva.
The menstruation appears several days too late.
The blood is black and abundant.
The menstrual blood is reddish-black.

The menstruation comes on six days too soon, when on the feet the blood flows continuously.

During the menstruation she feels cold externally and hot internally and must drink a great deal.

Cutting pains through the body on the second day of the menstruation.

White fluid discharge like milk coming away in drops.

Very profuse white discharge, leaving white and gray spots on the linen, with itching in the abdomen.

The white discharge has a sweetish odor.

A chronic rattling in the throat causes a dry cough.

The whole chest pains as if compressed, and when breathing, sharp stabbing pains traverse the chest, worse on the left side.

Stinging in the chest which prevents him from taking a long breath.

Pain in the region of the diaphragm as if it was inflamed; when gaping, drawing pains under the right ribs, extending as far as the spine; they come and go frequently and are aggravated by respiration.

Stabbing pains one after another in the upper portion of the left breast, worse when breathing, lasting half an hour.

Stinging pains under the false ribs on the left side which grow on lying down, on external pressure and on deep respiration with flashes of heat.

Twisting pains in the left breast.

The nipples pain on touching them, as if they were sore inside.

BACK.

Pains in the spine, extending into the lumbar vertebrae and then into both sides above the crests of the ilia and into the inguinal regions where a pain as of inflammation is felt.

The dorsal pains are increased by bending.

Pains in the spine as if it had been injured, as bad during repose as when in motion.

Drawing and stinging between the shoulders with oppression of breath.

Drawing pains between the shoulders, extending downward along the spine, toward the liver and upward into the chest;

then the respiration becomes oppressed and frequent shooting pains traverse the entire body.

In the left axilla, an electric shock which shakes the whole body, and in all the joints there occurs a trembling, such as might be produced by an electric machine, and which causes each time a sensation of fear.

UPPER EXTREMITIES.

The whole right arm, but principally the axilla, feels as if it had been dislocated by a blow.

Stabbing pain under the right arm toward the breast.

The right arm feels heavy and she cannot lift it well; feels a sensation of numbness as if the clothing was too tight with turgescence of the veins.

The muscles of the fore-arm seem to grow large and have a feeling of stiffness.

Wrenching pains in the elbow joints.

Wrenching pains in the joints of the left hand.

Pains as if from fatigue in both loins, when ascending the stairs.

Drawing and cutting pains from one iliac crest to the other as if a knife had traversed the abdomen; often intermitting and always returning.

LOWER EXTREMITIES.

Painful tension in the muscles of the thigh as if a long walk had been taken.

Wrenching pain on the outside of the right knee extending down the right side of the leg to the malleolus, from thence into the heel where it ceases.

Trembling of the legs from the knees to the toes so that there is difficulty in walking or raising the feet.

Tearing pains in the calves of the legs, with a feeling of heat, extending down to the toes; the palms of the hands and soles of the feet are very hot.

Tearing pains in the articulations of the feet and in the toes, for several hours.

The back and soles of the feet are swollen, after thirty-four hours, with tearing pains in the ankles and soles of the feet on account of which, though very tired, he was not able to sleep.

A feeling as of electric shocks in all the joints.

GENERALITIES.

General weariness, lasting several days.

When sitting down, a feeling as if the whole body were swaying to and fro.

At 4 o'clock in the afternoon great fatigue with profuse cold sweat and somnolence for two hours.

Much of the hair falls out.

Pulse weak and thready and increased in frequency.

Frequent gaping with great somnolence.

Continued yawning although the joints of the jaw are painful.

She would like to sleep all the time, day and night.

She cannot keep awake and goes to sleep in her chair; her feet go to sleep.

After having passed the night rolling around in bed without waking and passing from one dream to another, she wakes at 5 o'clock, the bed clothing thrown aside and without her night cap, a thing which had never happened to her before.

Sensual lascivious dreams.

IN THE DRY DOCK FOR REPAIRS.

THE HOMŒOPATHIC RECORDER, *Vol. V, No. 2*, finds one reader thereof in the dry dock, for repairs. Not so very ill, but far enough on in years to have learned that a gray-head of waning vitality can very easily find death in the insidious winds of March. For himself, he holds his life full cheaply—he has made so little of it—but there be some wee ones for whose sake death is a grisly terror, and when a storm arises he betakes himself at once to the dry dock.

How keenly a doctor is made to realize the stony selfishness of human nature. He is taken ill, and often because he outrages his own body by irregular meals, broken sleep, exposure in all weather, and all this in his patrons' service. He too needs rest, warmth, wifely care, and "the remedy." He puts up a bulletin in his office—"*Sick, and obliged to take his own pills!*" Does one "office patient" in ten heed that? Don't they come, with some petty indisposition, even to the poor doctor's dry dock and insist that he *must* see them? Who hasn't "prescribed" for such petrifactions when burning with fever, racked with headache, or even reeking with an aconite sweat! And yet, Celsus says, in prescribing we should bear in mind the *tuto, cito, et jucunde*! A doctor with a full-sized migrane is apt to be d—d* *pleasant.*

Shade of him that was Patrick M. how effectually did thine ægis once protect me! But never shall I see thy like again—peace to thy dust. "Pat" came to my door, in the years agone

*As Lamb put it when writing to Wordsworth, "by d—d, I mean *deuced*."

dreadfully destitute, more dreadfully drouthy, and most dreadfully dirty. He it was who first shook my faith in *Mure's Provings*. My "Pat" "proved" three species of *pediculi* at once, and all the "symptom" he got was an itching that he declared was "only a thrifle whin y'er born to it:" a postulate which convinced me that "Pat" was a peripatetic philosopher of the first magnitude. Never was a night so inclement that "Pat" wouldn't cheerfully arise from his bed and drive me any number of miles; in fact, "Pat's" alacrity had an occult dependence on the weather, for the worse the night the more willingly did he arise from his warm bed. On such an occasion he never sulked: I often did; and when, on a cold, windy, moonless night, I would sit in sullen silence "nursing my wrath," "Pat" would beguile the weary miles by crooning old Irish songs. From him —and him only—I have heard "*The Cruelty of Barbara Allen*," and "*Johnny Armstrong's Last Good Night*"—songs that poor Goldsmith sighed for amidst all the tinselled splendor of London. Ah, "Pat," in my memory many a Jersey road is vocal even now. Thy voice did treacherously "crack" now and then, and it had too much of the *tremolo*, and some of the quaintest of quavers, and thou didst roll the *rs* most damnably; but now I hear it from afar, mellowed by years that are forever gone, and it is strangely beautiful. "Arrah, honey, why did ye die?" I ask it now as solemnly as thou didst when thine honest tears fell on the face of my dead boy in the long ago. O thou who wert at once my servant, companion, and friend, let me touch thy failing tenderly, for there is One who knoweth mine infirmities and He shall judge us both!

Poor "Pat" loved "lightning" even better than did Benjamin Franklin—but "Pat's" variety was that "blue ruin" technically termed "*Jersey lightning*." It is found in every Jersey farmer's cellar, and is put there in the belief that "lightning never strikes twice in the same place." Well, if a house has been once struck by "Jersey lightning" Jupiter Tonans were a sucking fool to waste his bolts on it. Nevertheless, a genial hospitality always put a decanter of apple whiskey at the service of doctor and driver when a night visit afforded a *raison d'etre* for "internal fortification," and the worse the weather the more one fortified—q. e. d.! If "Pat's" potations were over liberal, and I would reprove him, when out of the house, how he would disarm me with his "Shure, sor, I take it agin' the *mallarhœa!*" He meant the Jersey malaria, which is, indeed, not worse than its "lightning."

But I started to tell how "Pat" protected me when I was in

the dry dock for repairs. Well, it was a proud day for him when he was initiated into the mysteries of triturating. He grew visibly in stature on finding that *he* could make "thim powthers." Alas! pride attends us all, for soon it was "Our arcenkims purty low, sor, shall we make more the day, sor?" He attended to the office stove from the first, and when I made him a triturator (almost as cheap as Sherman's) he kept a pride-ful look out for empty bottles on my shelves. Shall *we* make more this day, sor?" The sense of copartnership expressed in that "we" was "a thing of beauty and a joy" to "Pat," and I never disturbed his complaisance.

Once when I was ill "Pat" was put on guard to keep out importunates. At last a patient called who had more brass in his make up than the famous Colossus at Rhodes—he was a noted lobbyist in Washington. *Him* the doctor must see; *he* was no common patient, etc., etc., etc. Finally "Pat" lost all patience, and put the Colossus out of doors, exclaiming: "To h—l wid ye; *we're* doin' no bizness the day!" The Colossus was a humorist; and from that day "Pat" figured as my "partner."

* * * * * * * *

I have had no need for "Pat" to-day; *Allium cepa* and THE RECORDER have mutually done me good, and an item on p. 96 of the latter has driven me into the chair in which I have done all my writing. It has, to-day, a perforated wooden seat to match the wooden head that occupies it, and I have often worn the imprint of that perforated seat even as a roll of butter bears the pattern. Oh, it is a curious chair, for often when I sit in it o'nights and smoke my final pipe, the old chair will fill the room with ghosts, shadowy shapes of doctors that have sat in it but who have long since gone where all that vexes here is solved. In such a chair one learns to call things by their right names; to be and not to seem; to hold oneself as less than the least; to bear the smart of being misjudged—I must will that chair to some pollywog professor—"big head" and no body!

But here's for the item on p. 96. It says, of that miserable devil's broth that "the recipe came originally from 'Julii Cæsaris Baticelli, etc., etc., Genova, 1620.'" Now as Julius Cæsar's namesake has had the *dumb* palsy for over two centuries and is, moreover, by this time steeped in the soundest of slumbers, I desire on the part of the aforesaid J. C. B., to disown all claims to "originality" therein, and on my own to declare that Julius Cæsaris Baticelli, despite the *a Sancto Mario*, "cribbed" it in the 17th century just as Brown-Sequard has done in the 19th, and now, as Audrey says, let me "instance."

"No one," writes the Rev. Oswald Cockayne, "knows anything about Sextus Placitus nor why he should be called Platonicus or Popyriensis. Perhaps he is a nominis umbra." Notwithstanding, there are in existence a Latin and a Saxon codex of *The Medicina De Quadrupedibus of Sextus Placitus.* The age of the Latin codex I know not, but it was evidently brought into Britain by the victorious Romans; the Saxon text dates not later than 1000 A. D.

Running over the pages of this "Quadrupedal Medicine" in Mr. Cockayne's translation, I find this: "If to any one anything of evil has been done [by a knot] so that he may not enjoy his lusts, then seeths a coillon of the brock* in running spring water and in honey, and let him partake of it, fasting for three days: soon he will be mended." But what is a "knot?" Our learned translator says—"One of the torments with which witchcraft worried men, was the knot, by which a man was withheld so that he could not work his will with a woman." I *could* cite two recipes for producing "knots," but *cui bono!* Men who seek for Brown-Sequard's "Elixir" don't want any "knot"—their's is the brock's coillon seethed in running spring water and honey!

But Sextus Placitus also gives the following—"*Ut coitus appetitus excitetur; sume cervi testiculos, siccatos ad pulverem redige, partemque in vini poculum indito; ita appetitum ad congressum cum mulier excitabis.*" How about the "originality" of Julius Cæsaris Baticelli, and Brown-Sequard?

The Latin codex is responsible for the above, but as probably deer's testicles were difficult of obtainment, the Saxon offers a more convenient surrogate. Here it is: "*Ad concubitum perficiendum; testiculos tauri siccatos in pulverem redige: aut etiam alterutrum; in vino comminutos crebris ille haustibus ebibat, qui hoc philtro indiget; ita promptior ad venerem erit atque citatior.*"

Nil novi sub sole? In the matter of deviltry, alas, no! Absolutely nothing new under tho sun: *per contra*, a leader in "Scientific Medicine" in the 19th century stealing the philters of Sextus Placitus and his Saxon student! Like the crab, poor Brown-Sequard makes progress by going backwards.

An old, old book declares that "we are fearfully and wonderfully made," and I must confess that I had to read Sextus Placitus in order to apprehend it. For instance, what do you think of this: "In order that a woman may kindle a male child, a hare's belly dried, and cut into shives *or slices*, or rubbed into a

---

*A *brock* is a badger; what part of his anatomy *a coillon* is my reader must guess, for I won't tell; never, no never!

drink; let them both, *man and wife*, drink it: if the wife alone drinketh it, then will she kindle an *androgynus*; that is as naught, neither man nor woman."

But it seems that the woman could "play a lone hand" in this game of sex determination, according to Sextus P. Thus: "After her cleansing, give in wine to drink a hare's coillons to the woman; then will she conceive a male child." Leaving the hare's coillons, isn't a boy baby generally regarded as a post-menstrual *accident*?

I doubt not but that my medical reader has before to-day been appealed to for help in that saddest loneliness—a childless home. Well, our good-natured Sextus has this recipe: "To make a woman pregnant, give to drink in wine a hare's runnet by weight of four pennies to the woman from a *female hare*, to the man from the *male hare*, and then let them do their concubitus, and after that let them forbear; then quickly she will be pregnant; and for meat she shall for some while use mushrooms, and instead of a bath, smearings; wonderfully she will be pregnant."

Dear reader, you can omit the hare's runnet—the gastric mucous membrane—but perhaps Schüssler's *Kali phos* may help some barren wife to fructify, for that "remedy" abounds in the mushroom, and dear "Hg." used to say that mushrooms were a grand tonic in convalescence, and that is just what *Kali phos.* is—try it. In convalescence or in sterility? Both, sir.

* * * * * * * *

I closed the covers of Sextus Placitus and filled my pipe for a smoke before going to bed. Somehow I took from the shelf Philemon Holland's translation of *Plinie's Naturall Historie.* In the "Tenth Booke, Chap. LXIII, *The generation of living creatures upon the land*," I read "Men and women both, and none but they, repent at first the losse of their maidenhead. A very presage (no doubt) of a life to ensue full of trouble and miserie, that thus should begin with repentance. All other creatures have their set times and certain seasons in the yeare when they ingender; but all is one with us, and no houre of day or night comes amisse. Other creatures know when they have enough, and rest satisfied: we only are insatiable that way, and cannot see to make an end."

Homo sum? Aye, and I did not feel proud of it—outdone by a brute in continence. Then came to me the aged Tennyson's lines:

"What hast thou done for me, grim Old Age, save breaking my boues on
the rack?
Would I had past in the morning that looks so bright from afar.

OLD AGE.

Done for thee? starved the wild beast that was linkt with thee eighty years back.
Less weight now for the ladder-of-heaven that hangs on a star.
*** * * * * * * * * * ***
I have climbed to the snows of Age, and I gaze at a field in the Past,
Where I sank with the body at times in the sloughs of a low desire,
But I hear no yelp of the beast and the Man is quiet at last
As he stands on the heights of his life with a glimpse of a height that is higher."

Ann Arbor, March 11th. S. A. J.

NOTE.—I beg to assure my reader that Sextus Placitus is not an invention of mine. The text cited by me can be found in Vol. I of *Leechdoms, Wortcunning, and Starcroft of Early England.* London, 1864. Beside my own, Dr. Samuel Swan possesses the only other copy known to me. I trust that this study of our poor human nature will not be misunderstood. *I* have written seriously; let me be read likewise.

CASES FROM PRACTICE.

Mr. D. B., aged 24 years and married, applied to me for relief during the month of November, 1888. Some three months before he had an attack of Acute Orchitis involving the left testicle. From what I could discover and learn concerning the history of the case, the inflammatory condition was produced by an accidental blow received while chopping wood. The treatment had been prompt and consisted of eclectic prescribing and local applications, but notwithstanding the continued use of medicines, the swelling had gone on, the chronic stage been reached, and when I was consulted for relief, the testicle had attained the size of my fist (and right here it might be proper to mention that I have as yet failed to gain any notoriety for having a diminutive hand), was hard, indurated, and very sensitive to the touch. The integument presented a red shining appearance. The patient was not confined to the house, but on the contrary attended daily to some of the farm work. I gave him a vial of Belladonna tincture directing that he take three drops at a dose —three times daily, which was followed by speedy relief, and in a few days the gland was reduced to its natural size.

CASE II.—November, 1889, Mr. B., aged 20 years, a brakeman on a freight train, contracted a gonorrhœa which proved severe, although quite amendable to treatment. At about

the fourth week when the discharge was about controlled, a rainy cold day set in, and my patient exposed on the roof of the cars became wet to the skin and caught a bad cold. Besides jumping from car to car, and from the high iron step to the ground, he strained the muscles of the legs, groin and back which resulted in gonorrhœal rheumatism and inflammation of the right testicle, which rapidly increased in size until it had attained nearly the size of my fist. At this point I was called to the bedside of the unfortunate youth and found he had experienced several marked rigors, temperature was 102 3-5. the testicle was hot, to appearance a deep red in color, and extremely tender and painful. I gave him internally Belladonna tincture about fifteen drops in a half glass of water, of which solution he took two teaspoonfuls every hour, and locally I used the Acetate of Lead. *Behold the results!* The old school and the *Faith Healers* would have called it a freak of nature—but the devout Homœopath sees such *results continually*. In twenty-four hours the pain was gone, the fever gone, the unfavorable symptoms of septicaemia gone. The following day he was out of bed, and within a week climbing freight cars again.

CASE III.—Mrs. E., a young married woman about thirty years of age, of a highly nervous temperament, and very susceptible to the action of drugs, complained of her throat being very sore. Upon an examination I found the tonsils were swollen, bright red in color and covered with numerous dirty white patches. There was almost constant pain and great difficulty in deglulition. Belladonna tincture, a few drops in half a glass of water, and two spoonfuls every hour, cured this case in twenty-four hours.

CASE IV.—Miss A., a beautiful blonde of about twenty-two years of age came under my treatment last winter for an attack of acute œdema of the tonsils, which proved so serious as to compel her to leave the office in which she was employed and confine herself to the house. The tonsils in this case were swollen to such an extent that the throat was almost closed, and dotted with patches of a green and whitish color, with a tendency to suppuration. The accompanying pain was very marked, and she could only swallow liquids with much effort. I gave Belladonna tincture a few drops in half a tumbler of water, and ordered two spoonfuls to be taken every thirty minutes. In this case I was somewhat alarmed and also used a steam inhaler for the throat, in which I put some Belladonna θ and k. bich. 1x. In six hours the pain was greatly relieved, and in forty-eight hours I discharged the case as needing no further medication.

CASE V.—Mrs. B., a married woman about twenty years of age, the mother of one child, came to me for treatment last January, for an abscess of the left arm, situated midway between the shoulder and elbow on the external side. The lady had been under the care of one of my allopathic colleagues who had prescribed internally Cod Liver Oil, and externally it had been painted with Iodine tincture for three months. Upon examining the arm I found the left Humerus two inches shorter than the right, and, inquiring into the matter, I learned she had a similar abscess when she was a child seven years old, which discharged continually for two years, during which time several pieces of bone came away and subsequently it healed up without any treatment. The tumor before me was of considerable size, and using a trocar and canula I withdrew over half a pint of yellow pus, after which, by the aid of a probe, I found the bone to be rough and diseased in places. Thinking it would be a good time to test Homœopathy, I gave her internally Silicea 30 a powder night and morning. The action of this remedy in this case over the suppurative process was not to be disputed for in three weeks the arm was healed and has remained so up to this writing.

CASE VI.—Miss M., a domestic, aged 23 years, came to me with an open running sore on her thumb. Six months previously she irritated the thumb in the wash tub, and very soon a felon resulted, which either was an unusually severe one or else badly managed, and the continual swelling and constant discharge had resisted all treatment. I made a free incision to the bone, and prescribed a powder of Silicea 30, to be taken internally morning and night. In a few days two small pieces of bone worked out from the wound, and within ten days it was entirely healed.

Falls Village, Conn. H. E. C.

"GRAFTS:" WHAT ARE THEY?

"Graft" is a term used for a dose of medicated pellets of a given remedy and potency which is intended to be put into a given quantity of Alcohol which thereby is supposed to be charged with medicine, and with this Alcohol pellets are medicated *ad infinitum*.

There was a time when at one of our Eastern colleges great enthusiasm was manifested for a number of years on behalf of High-Potencies and every student who started out, did so pro-

vided with a set of Jenichen's High potencies made from "grafts" obtained from a physician for a consideration. As a rule these graft-potencies were made *cheap*. Vials were obtained from the glass-blowers, corks and Alcohol from druggists; into the more or less well cleaned vials a few pellets of the doctor's set were dropped, on this was poured some commercial Alcohol and then the young doctor started out ready for practice. As a rule, nine-tenths of these young practitioners would send in an order for θ and triturations within the first three months and would ever after feel sore when high-potencies were mentioned.

Grafts in former years were made use of in emergencies. When one physician helped out a colleague in this manner the latter usually hastened to procure a supply of the remedy from a reliable source with next opportunity. But while such a make-shift may be excusable in an emergency, no conscientious physician will or should resort to this practice habitually and no conscientious Homœopathic pharmacist will dispense such remedies. The reason why "Jenichen's" high potencies fell into disuse may be chiefly due to the fact that almost the entire stock of these remedies in this country consists of "*grafts*" more or less carefully made, from an original set in possession of the late Doctor Constantine Hering. Jenichen's potencies were after a while superseded by Lehmann's, Dunham's, and other high potencies made by Homœopathic pharmacists of this country.

There is or was still another way of making cheap sets of high potencies. Eight or ten students would "club" together and buy an original set of liquid high potencies from a pharmacist, then subdivide it into as many sets of vials filled with alcohol. Of the value of such a set the writer was casually apprised by the following incident: A well known physician and writer in New York remarked one day: "Isn't it strange that I never can get any results from your 200th of *Apis* and *Bryonia*. I have used them again and again but was ever disappointed in the result." He was told that this was astonishing news indeed as a leading physician in New York city had taken the trouble to pen a special letter informing the maker of these potencies of his marvelous success with this *Apis* 200 in three successive virulent cases of diphtheria—and never a complaint had been received about any of the other remedies. In the course of the conversation it finally came out that the doctor was one of a party of ten who had clubbed together and bought one set of H. P. which was then subdivided between them into ten sets. He then and there ordered a new original set and has not had any reason to complain since.

When it is taken into consideration that reliable high potencies can be purchased at a cost of less than 1–200 of a cent per dose to the physician, it would seem that "*grafts*" should veritably be a thing of the past.

The following is quoted from a paper in the *Homœopathic Physician* for August, 1890, by Dr. J. G. Gundlach, on the subject of *Sanicula*:

"Please permit me to say further in this matter that some three months ago I received letters from the well-known pharmacy house of Boericke & Tafel, of Philadelphia, asking for information about the *Sanicula*, how to secure the remedy, etc. In my reply I told them what the remedy was and how I had proved and obtained it, making them a proposition to this effect: If they would agree to compile and publish all the non-published matter of *Sanicula* and publish it in THE HOMŒOPATHIC RECORDER, which they claim is devoted to introduction of new remedies, I would give them grafts of all the original potencies I have made by my own hand at the time of proving, I having retained them from the 9th to the 100th, so giving them complete control of this 'new and highly valuable remedy,' an offer which I thought they would gladly accept, but this they declined with thanks, saying, 'we cannot use grafts.'"

Why the firm in question could not, or would not, use grafts of *Sanicula* is apparent from what has already been stated. Dr. Gundlach of his proving says: "Six years have since then passed, and the springs, for all that we know, may have changed their constituency in this time." That is hardly reasonable; no one ever heard of a mineral spring changing its constituency and if such a thing were possible there would be no reliance to be placed by the medical profession on any of the salts or waters of such springs.

It is a well established fact that mineral springs retain their characteristic properties through hundreds of years and only in the instances where they have been tampered with by borings, etc., by proprietors who seek to enlarge their capacity have they been known to change their character.

It is rather unfortunate that the spring, or the potentized remedy from it, should have been christened "Sanicula," a name borne by a medicinal plant known in medicine for many years. The two are now distinguished by calling the new remedy *Sanicula aqua* while the other continues to be known by its botanical name of *Sanicula Marilandica*. The *Sanicula aqua* which Messrs. Boericke & Tafel have was furnished them by Dr. H. M. Bascom, of Ottawa, Ill., where the spring is located.

The water has been potentized and also some of it evaporated and the salts triturated so that it may be obtained in either form, as low as the 3d centessimal.

A. J. T.

CORRESPONDENCE.

ANOTHER VIEW OF THE "RED LINE."

To The Homœopathic Recorder.

In The Homœopathic Recorder, page 170, Drs. E. R. Snader, Johnson and (Coolidge indirectly) seem to have settled the question of the "famous red line along the gums" as being due to an accumulation of tartar. If that settles the case, tartar and red line should be constant, but which is by no means the case. It is true that accumulations of tartar will cause the gums to recede from the teeth and become spongy and red, but when I see the red line of the gums I look in the absence of tartar and even then for a far different cause, I look for a chronic or present mercurial condition of the system.

Take a patient free of mercurial diathesis with healthy gums and teeth and put him, or her, on one grain doses of Calomel (proto chlor. of mercury) on two grains of *Blue Mass* once in every four hours, then watch the effect upon the gums, and you will find, according to the susceptibility of the patient, within a few hours to two or three days, a well defined red line around the gums near or following the teeth, especially on the lower jaw, does or will appear. Then the prudent physician will halt and see if he has not already attained the desired constitutional mercurial action, or if he desires to carry it on to ptalysm or salivation and the mercurials are administered at a temperature of the patient below the sweat line, the gums will become wholly red, the teeth sore, the sub-maxilary glands enlarged and tender and the patient will begin to discharge saliva from the mouth copiously, but if the medicines are given when the temperatur is above the sweating line the gums, mouth and glands will become of a deeper, darker red, the mouth dry, the tongue blac with general ulceration of throat, gums and all in a truly diph theric condition except, perhaps, absence of ash-colored fals membranous patches. If the patients recover in both cases w have two cases of mercurial constitutional diathesis to deal wit

for several years to come, or during life there will will be red lined gum cases with an increased tendency to tartar accumulations influenced by the weather changes, changes of diet chemically or otherwise, subject to a thousand accidents to which they were free before their mercurial experience. I have seen the red line of the gums produced by the 3x 6x of mercurous viv., and Mer. Sol., and I believe all of our mercurial preparations will produce it. Don't ask me whether we have any of these herculean practitioners in any of our professions to-day; but if you do my answer shall be that if you will show me the same symptoms above described I will say that they were produced by the same cause.

Without assumption I will say further that after the 3d Trit. of our mercurial medicines they are soluble, and after entering the system will excite the excretory glands and other organs, so as to eliminate from the patient's system any after deleterious effects of that of all other drugs the most pernicious to our race when improperly used; I have seen two molars and one biscuspid exfoliated with alvular process in one block in a beautiful girl of promise eight years old from dry mercurial action. But as to the insoluble preparations so long in use, I will assume to say, that from their ponderability and susceptibility of fine division, they will enter the circulation and follow it up until in the smaller capillaries of the bones, cartilages, joints, etc., they will become repositories for years or even a lifetime; so that some slight chemical action may eliminate with a new mercurial attack upon the gums, together with all the other evil results characteristic of that drug. So that it is possible that we are tampering with that pernicious drug in this enlightened age. Have we no young scientists of to-day who can find in some of the old bones left direct from the hands of Mott, Dr. Maclellen, Eberlee, Sir Charles Bell, or Dr. Rush, of that age—17th century—who can verify my position? God knows, I revere their names; they were not to blame for having lived in the light of that century; but now under a new light, Hahnemannian, I feel like calling every man to an account for his act in this sacred art of healing the sick. The red line of the gums is as sure to appear on the administration of mercury as death is sure to follow a fatal dose of Prussic acid. Now there is only one thing more I will say, that to establish Dr. Snader's theory of red line gums as a fact it becomes incumbent on him to show that mercurials had not been used in the cases cited by him.

Respectfully yours,

A. P. GARDNER, M. D., *Elmhurst, Pa.*

PEACH BARK vs. PEACH LEAVES.

To THE HOMŒOPATHIC RECORDER.

Apropos of the remarks made by Dr. C. C. Edson upon the efficacy of infusion of peach *bark* in the gastric irritability of children, we might mention the following authentic case:

An infant, during its second summer, had been much reduced by acute dyspeptic diarrhœa. A marked feature of this case was the persistent vomiting of all food. The stomach would tolerate no form of baby food with or without milk. The child's parents had consulted some eminent physicians of our city. The child had been treated Homœopathically. None of the remedies chosen seemed to produce the desired effect. After a consultation it was deemed best to send the infant to the mountains. The change aggravated its condition. While the parents hourly expected their baby would die, it was suggested that they send for an old practitioner living in the mountains near at hand. This man had a local reputation as a saver of dying babies. His prescription was as follows: Two or three fresh peach *leaves* were to be put in a cup of boiling water, the infant to receive a "drink" of this infusion at frequent intervals. The effects of this remedy were as remarkable in this case as in the case narrated by Dr. Edson. Our child soon retained food and eventually recovered.

It seems this ancient disciple of Esculapius had long used peach leaves and regarded them as possessing specific virtues.

OLIVER S. HAINES, M.D.

Philadelphia.

GLYCERINE IN GUN-POWDER INJURIES OF THE EYE.

Two years ago my son Bob was firing shooting-crackers. One on the fence, close to his head, had been forgotten—it squibbed, filling his eye with the tamping material and powder grains. Failing to wash and pick it all out, I concluded that if I could get the osmotic action of pure glycerine, the powder grains would be lifted out. Applying glycerine to the eye, and placing a compress saturated with the same, he was put to rest. Result, in the morning: The eye was entirely well, no vestige of inflammation remaining. Fourth of July last same boy had same eye injured by a very large cannon cracker exploding in his hand.

The eye was filled with large grains of powder, the sight being obliterated. Applied glycerine, with compress wet with same; by evening he was viewing the fireworks display.

J. S. READ, M.D.

1518 Choteau Ave., St. Louis, Mo.

SELECTIONS AND TRANSLATIONS.

HOW HAHNEMANN CURED.

BY DR. DUDGEON.

Homœopathic World.

At the present time, when we have a rather noisy, if not very numerous, section of our school arrogating to themselves the title of Hahnemannians, and publishing their cases as examples of "Hahnemannian Homœopathy" and "Hahnemannian Cures," it might be as well to set forth Hahnemann's mode of practice as far as that can be learned from his teaching in the *Organon* and *Chronic Diseases*, and from the instances of it scattered throughout our literature, in order that the reader may have an opportunity of comparing it with that of the self-styled Hahnemannians. If the instances I adduce belong to ancient history and are familiar to many of my readers, they are apparently unknown to or forgotten by some of those who would fain have us believe that they alone rightly understand and faithfully practise what Hahnemann taught.

In the second volume of the first edition of the *Materia Medica Pura*, published in 1816, Hahnemann gives, at "the request of some friends halting half-way on the road." to Homœopathy, two cases illustrating the way in which he practised, and desired others to practise, his system. As these cases are retained in the latest edition of his *Materia Medica*, published in 1833, only ten years before his death, we must believe that to the last he considered them as good examples of his treatment which he could not improve upon after all these years.

[Several long quotations are here given by Dr. Dudgeon which are omitted for want of space.]

Hahnemann held it to be absolutely necessary for the successful practice of his system that the practitioner should select a medicine whose ascertained effects on the healthy body should correspond to the totality of the symptoms of the disease. This he does in every edition of the *Organon* (par. 153, 5th edit.),

and still more impressively in the last edition of *Chronic Diseases* (1835). He there says (Part I., p. 150) that after having ascertained with the greatest diligence all the ascertainable symptoms of the disease, he must select the remedy whose symptoms correspond in similarity with those of the disease, at least, with the most striking and peculiar symptoms, and he must not rest content with what he can learn from repertories, as these books only give slight hints as to the medicines to be consulted, but cannot enable us to dispense with a study of the original sources. He who is satisfied with the vague indications afforded by the repertories, does not deserve the honorable name of a true Homœopath, but rather that of a muddler who will bring disgrace upon the art he professes to practise. "The miserable desire to save themselves trouble," he continues, "often leads these pseudo-homœopaths to be guided by the accounts of their successful employment (*ab usu in morbis*), such as are given in the prefaces to the medicines [in the *Chronic Diseases*], in their selection and employment of medicines, an utterly false method smacking of allopathy, incapable of leading to the selection of a medicine, which cannot be curative unless it be strictly Homœopathic in similarity of symptoms." And yet we see self-styled Hahnemannians mainly guided in the selection of a remedy by some symptom got out of a repertory, presumably derived from clinical experience only, as it is not to be found in any pathogenesis of the drug.

Hahnemann was very emphatic as to the necessity of all Homœopathic practitioners employing medicines prepared in the same way, and he describes in great detail his peculiar mode of preparing his medicines not only in the *Organon* but again with equal or even greater minuteness in the *Chronic Diseases* (2nd edit., Part I., pp. 184–187). The attenuation of some medicines by dilution with spirits of wine through thirty different phials up to the 30th potency, with a certain number of strong shakes, and of others by trituration with milk-sugar for certain definite periods and a certain number of times, and their further attenuation with spirits of wine through twenty-seven phials, is insisted upon as the only proper method for enabling us to treat our cases with uniformity. How widely the self-styled Hahnemannists have departed from Hahnemann's instructions! As a rule they use only one bottle for the whole series of their attenuations; they employ spring or service water with all its impurities, and they practise no succussion according to Hahnemann's plan. Moreover they do not all make their preparations in the same way, nor apparently do the numbers they attach to their prepar-

ations express the same degrees of attenuation. The consequence is that their Hahnemannian friends who make use of these preparations have to say whose they are. Thus, after the number of the supposed dilution we see the names Jenichen, Lehrmann, Swann, Fincke, Boericke,* Skinner, to show who is responsible for the preparation. And there seems to be no certainty about the genuineness of these dilutions in the minds of their prescribers, for we find Dr. Skinner, in the second edition of his little work on *Gynecology*, attaching quite different numbers to the preparations of Swann and Fincke to those he allotted to them in his first edition. All this is completely at variance with Hahnemann's frequently expressed wish for uniformity in the preparation of the Homœopathic medicines.

Hahnemann insisted most urgently on the necessity of giving each dilution an adequate amount of shaking or succussion. At one time he limited the number of the succussion-strokes to two for each dilution; but in the last edition of the *Chronic Diseases* he advises that ten, twenty, or fifty succussion-strokes against a hard elastic body should be given to each dilution. The extreme importance Hahnemann attached to succussion as a means of increasing the potency of a medicinal substance is shown by a note to par. 270 of the *Organon*, where he says: "I dissolved one grain of soda in half an ounce of water mixed with alcohol in a phial, which was thereby filled two-thirds full, and shook this continuously for half an hour, and the solution was in dynamization and energy equal to the 30th potency." If that be so, then there seems no reason why we should take the trouble to dilute the medicines at all in successive phials, or in one phial like the high-potency manufacturers. Shaking the solution of the crude substance in a bottle would answer the purpose. And this is actually the way in which Jenichen is said to have prepared his so-called high potencies. I remember seeing in Stapf's house at Naumburg an oil painting of Jenichen, stripped to the skin,

---

*It is but fair to state here that the "Boericke" potencies, and also the "Tafel," are made from the first up to the 30th strictly in accordance with Hahnemann's directions; thirty vials, each one labelled on both bottle and cork with the name of medicine and the number of the potency; thirty vials are thus used *for every medicine* potentized, and these are kept in tight fitting boxes. From the 30th up to the 200th, or 1000th, Hahnemann's directions are strictly followed in every respect excepting that a separate vial is not used for each potency, but each potency receives not less than twelve powerful succussive strokes and nothing but the standard Homœopathic alcohol is used as a vehicle. For these reasons it would seem that Dr. Dudgeon ought not to have included these potencies with those made with water and which receive no succussion further than that afforded by the running, or falling, of the water.—RECORDER.

with his succussion-bottle in his hand. This bottle seemed to be a two-ounce phial, half filled with the medicine he was succussing. It was probably the above passage in Hahnemann's *Organon* that gave Jenichen the idea of making what he gave out to be very high potencies, by succussion only. Although the passage I have quoted, and several others I might quote, seem to indicate that Hahnemann believed the power of the medicine to be increased by dilution, a few paragraphs farther on in the *Organon* he distinctly states that dilution diminishes the power of the drug, and he gives a sort of mathematical formula for expressing this diminution of power, and he says: "I have *very often* seen a drop of the 30th potency of *Nux Vomica* produce pretty nearly just *half as much* effect as a drop of the 15th potency, under the some circumstances and in the same person."

Hahnemann's main reason for selecting the 30th potency as the standard dose for general use, as he repeatedly tells us, is to secure uniformity of treatment among Homœopaths. "I do not approve," he writes, "of your dynamizing the medicines higher—as, for instance, up to 36 and 60. There must be some end to the thing; it cannot go on to infinity. By laying it down as a rule that all Homœopathic medicines be diluted and dynamized up to 30, we have a uniform mode of procedure in the treatment of all Homœopathists, and when they describe a cure we can repeat it, as they and we operate with the same tools. In one word, we would do well to go forward uninterruptedly in the beaten path. Then our enemies will not be able to reproach us with having nothing fixed—no normal standard." Thus he wrote in 1829. In 1831 he rather snubs his amateur admirer, Graf Korsakoff, who wrote in an ecstatic manner about his fancied discovery of the power of much more highly attenuated medicines than Hahnemann recommends. Hahnemann says he does not doubt that these higher attenuations act, but he advises his followers to stick to the 30th dilution, at least for the present. In the last edition of the *Organon* (par. 287 note), he alludes to, but does not recommend, dilutions as high as 60, 150, and 300. He says these are only slightly inferior in power to the 30th, but their "action always appears to last a shorter time." In his last work, the 2nd edition of the *Chronic Diseases*, he recommends the 30th dilution as the highest it is advisable to give, but he does not confine himself to that dilution, but says that when it is advisable to repeat the dose, that should always be done in *a lower dilution*. Thus, if we have commenced with the 30th we should next give the 24th, then the 18th, next the 12th, and lastly the 6th dilution (I. p. 106). In the same work he recommends as

the dose for *Petroselinum* a drop of the fresh juice, and as that for *Nitric Acid* the 6th dilution.

Hahnemann's instructions, relative to the repetition of the medicine, were at one time to wait till one dose had exhausted its action, which might be days or weeks, before giving another dose, or rather another medicine, for he taught that the disease would have been so much altered in its character that the same medicine would no longer be Homœopathic, and another would be indicated. Next, in 1835, as we have seen, he said the medicine might often be repeated with advantage, but the succeeding doses should be in a lower dilution. In 1837 (see preface to third part of *Chronic Diseases*, 2nd edition) he altered his mode of procedure, and gave the medicine in solution in divided doses—in chronic diseases one dose every two days, or more generally every day; in acute diseases every six, four, two hours, or every hour or half-hour. But as he had previously taught that the vital force could not bear the repetition of the medicine in the same potency, the successive doses must have their potency altered by shaking the phial containing the solution with five or six smart jerks of the arm before each time of taking it. In this way, he says, "the same medicine may be administered with the best results an incredible number of times." After the solution has been exhausted and the same medicine is still indicated, it should be given in the same way, *but in a lower potency*. In cholera the suitable remedy should be given at much shorter intervals than the above, even as often as every five minutes. He also recommends the medicine to be rubbed in externally on a sound portion of the skin once a day, preferably in the evening before going to bed.

That Hahnemann in the latest period of his practice occasionally employed the lower triturations is evident from one of the cases from his note-book which I have given in the *Lesser Writings*, where he prescribed the 3rd trit. of *Merc. Sol.*, and also from the fac-simile letter I published in the same volume, in which he requests Dr. Lehmann, of Coethen—who, as Lehmann himself informed me, prepared all his medicines for him—to send him the 3rd trituration of sundry medicines, of which he encloses a list.

The self-styled Hahnemannians may, for ought I know, occasionally give their medicines in potencies as low as, or even lower than, Hahnemann prescribed them, but they seldom publish cases where they give lower attenuations than the 200th, more frequently the 1,000th, 10,000th, 100,000th, or even millioneth; or, to speak more correctly, preparations which they

designate by these numbers, on the authority of Jenichen, Swann, Fincke, and other manufacturers of these so-called "high potencies," each of whom has his own method of preparing them which differs from that of his rivals, but which is most certainly not Hahnemann's method.

The "high-potency" craze only broke out among Homœopaths after the death of Hahnemann. Had it appeared during his life-time I am sure it would have met with his disapproval, as it is diametrically opposed to all his teaching; and it is evident from a comparison of the last edition of the *Chronic Diseases*—his latest work—with the first, that he inclined in his later years to give his medicines less, rather than more, highly diluted, and to recommend much more frequent repetition of the dose than he had previously thought advisable.

I have thus, I think, shown conclusively that the practice of the self-styled Hahnemannians differs in every essential particular from that taught by Hahnemann.

1. Hahnemann distinctly says that the Homœopathist must not be guided in his selection of the remedy by what are termed "clinical symptoms." The Hahnemannians do not object to take their "keynotes" from this source.

2. Hahnemann, in his desire for uniformity of practice among Homœopathists, insists on the attenuations being prepared in a uniform manner, in separate phials, with spirits of wine as the diluting medium, one drop of the stronger dilution to 90 drops of the spirit, and a certain number of succussions given to each dilution. The high-dilutions of the Hahnemannians are now prepared in this way: they, as a rule, use but one phial for the whole series of dilutions, employ ordinary spring or service water as the diluting medium, and give (with the exception of Jenichen) no real succussion to their successive dilutions.

3. Hahnemann adopted as his standard highest potency the 30th dilution, and disapproved of pushing the dilution further. The Hahnemannians use much higher attenuations—all degrees, indeed, from the 200th to the millionth—or at least they assert and believe that their preparations are correctly designated by these figures. But they carry their disregard for Hahnemann's wishes for uniformity still further by using dilutions prepared in different ways by different manufacturers; and so, in a matter in which Hahneman desired that all practitioners should act alike, so that the experience of one might be available to all, there reigns inextricable confusion; for the experience of a practitioner who uses, say, Jenichen's preparation, is useless to one who uses Fincke's, which are made quite differently, and do not represent

the same thing; and as Swann's, Lehmann's Boericke's, and Skinner's differ from the others and from one another, the experience of the practitioner with any one of these preparations must be useless to him who uses any other. Thus the simplicity and uniformity which Hahnemann so emphatically enjoined is sacrificed, and those who use the preparations of these high-potency manufacturers may be Jenichenians, Finckeans, Lehmannians, and so on, but they have no right to call themselves Hahnemannians, for they act exactly contrary to what Hahnemann taught. It is quite possible that the practice with these so-called high-potencies may be infinitely more successful than that with medicines prepared according to Hahnemann's method; and if so, why not give their inventors the full credit of it, and depose old Hahnemann from his hitherto acknowledged headship? But to contravene Hahnemann's directions and teachings in every essential point, and to call themselves Hahnemannians *par excellence*, is quite unjustifiable, and is indeed absurd; for the high-potency practice is not a further development of Hahnemann's method, but is a new departure altogether at direct variance with Hahnemann's teaching.

Those of us who practise Hahnemann's system with modifications suggested by experience and reflection, which we imagine, perhaps mistakenly, to be improvements, do not announce ourselves as Hahnemannians or bestow on those who differ from us uncomplimentary epithets. The liberty we claim to ourselves in judging of Hahnemann's teachings we freely accord to others, but at the same time we decidedly object to those who have departed further than ourselves from Hahnemann's rules putting themselves forward as the faithful interpreters of Hahnemann's views. If we prefer the decimal scale of dilutions to the centesimal, we do not pretend we are carrying out Hahnemann's directions. If we give lower dilutions than the 30th we do not say we are thereby showing our adhesion to the *verba majistri*—though on the subject of doses the *magister* had many different *verba*, and we could cite his very last instructions as his authority for giving medicines not only in lower dilutions than the 30th, but also for repeating the medicinal dose "an incredible number of times." If we occasionally prescribe medicines from clinical symptoms only—*ab usu in morbis*—we acknowledge that Hahnemann was dead against that method; and if we sometimes even give medicines from pathological indications only, we do not parade such cases as "Hahnemannian Homœopathy," nor boast that we are treating our case on "Hahnemannic principles."

Hahnemann has laid down distinct rules for the preparation of

his medicinal dilutions. Who are Jenichen, Boericke, Lehmann and the rest, and what have they done for Homœopathy that we should, at their bidding, reject all that Hahnemann taught on the subject, and adopt their impure, novel pharmaceutical methods in place of Hahnemann's pure, simple, and well-tried plan? Probably these high-potency manufacturers know that they would get no custom for their wares if they advertised them in their own names as something quite different from Hahnemann's preparations, so they announced them as a development of Hahnemann's method, and assured their customers that by employing them they would show themselves Hahnemannians *par excellence*, and the result shows that they knew their men, and that these did not know their Hahnemann.

The practise of these self-styled Hahnemannians may be a great improvement on Hahnemann's practise, it may be everything its professors claim for it, but it is certainly not according to Hahnemann's teachings, and its practitioners have no right to call themselves Hahnemannians, except on the *lucus a non lucendo* principle, which has never yet received a scientific sanction. That those whose practice is so widely different from, so directly opposed to, Hahnemann's teachings should call themselves Hahnemannians, and really believe that they are his only true followers, shows that Hahnemann has already become a myth or legend, and that practises and doctrines he never taught, and which indeed he more or less explicitly denounced, are attributed to him by those who profess to hold him in extreme veneration. I would recommend to these inconsistent disciples, who honor the name but despise the teachings of the master, a course of his works, chiefly the *Organon*, the *Materia Medica Pura*, and *Chronic Diseases*, in their latest editions, feeling assured that if they give these works serious study they will see how opposed their practise is to Hahnemann's teachings, and will cease to call themselves Hahnemannians; and possibly they may then leave off calling unpleasant names those whose practise has not gone quite so far astray as their own from Hahnemann's.

A CASE OF CHOREA.

By (the Late) Dr. Job J. Hirsch, of Prague.

In 1884 I was called to family S., consisting of an old weakly-looking husband whose wasted form seemed to indicate a whilom rake, his well-formed, robust looking spouse of 30 and a daughter æt. 11—who seemed to be somewhat backward in develop-

ment and of a by no means vigorous constitution. She went through the usual sickness of childhood but with unusually slow recoveries. Commencing with her sixth year she received instruction at home by a governess and was at times troubled with headaches and restless nights. A physician who was consulted recommended a cessation of the studies and the headaches grew less and sleep more tranquil. After about a year instruction was taken up again with great caution, and the apt scholar under her experienced instructress' tuition made good progress until towards the end of her 10th year some symptoms manifested themselves which seemed to foreshadow an approaching nervous disorder.

Frequent twitchings of the muscles of the face, an unusually frequent winking of the eyelids induced the physician to designate worms as the probable cause of this nervous condition; he advised discontinuance of all lessons for the time being and recommended systematic gymnastic exercises. But all to no purpose, involuntary movements of the upper as well as the lower extremities became of frequent occurrence, the head was jerked, turned to one side and another and the grimaces looked frightful. Under these circumstances a number of physicians were consulted, the most various remedies were administered; but all to no purpose, instead of amelioration a decided aggravation resulted and on account of the violence of the involuntary motions she was bedded on a large mattress on the floor. Finally the despairing parents were informed by a friend that a Homœopathic physician, i. e. I, succeeded in curing a very bad, even worse, case a few years ago—and next day I was called in.

On entering the sick-room I found the patient on a broad mattress in the middle of the floor, where she, like a veritable *perpetuum mobilé*, flexed first this then another extremity, rapidly jerking her head to the right, then left, making fearful grimaces.

After receiving a succinct account of what had been done before, I learned how liberal the physicians had been in administering all sorts of remedies with at best but transient amelioration. For the last two months they felt convinced that anemia was at the bottom of the trouble and the poor patient had to put down iron pills of all sizes, but the wished for salutary effects did not manifest but instead a decided aggravation of all symptoms supervened.

The task was a difficult one for me as I could hardly hope for an immediate favorable effect on administering our small doses after the prolonged massive dosing with drugs.

I then bethought myself of a very difficult case which I had

about ten years previous, of a young man, where I succeeded in producing a radical change and quieting of the nervous system by applying a thin stream of cold water to the spinal column. An irrigation apparatus was at once procured and on the evening of the same day I applied the irrigation. The patient was seated in a round basin, the upper part of the body being based, on the bottom of which a linen cloth was placed folded many times together. An attendant in front of the patient, kept her in a sitting position, and now I applied a thin but vigorous stream of cold water beginning at the neck down to the sacrum, and this was repeated several times. The patient well dried off and reclothed was then brought to the horizontal position. Very striking to all, except to myself, was the favorable effect; she lay much quieter, could speak without stammering, and, to the surprise of all, took smilingly a proffered cup of beef broth, held it in hand without shaking and drank the whole contents. I hastened to assure the amazed parents that they could by no means expect the amelioration to proceed in the same ratio, but that they had to expect that many an aggravation would occur before permanent improvement would set in, but that I was able to assure them that in a few weeks every vestige of the ailment would have vanished.

I related the case of the young man whose affliction had reached such a degree that feeding was rendered extremely difficult; as he never could voluntarily open his mouth, an attendant had to sit close to his couch watching for an opportunity to administer a mouthful whenever it was jerked open. And if they could now see the well-built, vigorous young man, it would seem almost incredible that he should have been in such a miserable condition when a full grown boy. After ordering a simple but strengthing diet I left the patient promising to give in the morning full instruction as to the application of the irrigator. The night was passed, by the patient, much quieter, she even slept uninterruptedly for two hours, but on awaking the involuntary motions and jerkings were still observed though in a less degree than formerly. Irrigation was applied same as in the preceding evening and patient again put to bed. Thereafter twice daily irrigation was applied and the considerable amelioration seemed to become a permanent improvement. I then commenced Homœopathic medication exhibiting twice a day *Ignatia* 6 but as after a week's trial no particular improvement could be observed I changed the prescription to *Cuprum* 12. Morning and evening the patient received 6–8 pellets and after two or three days it became manifest that *Cuprum* was the suitable

remedy. The patient who a week before had to remain seated all day on a chair, on account of weakness and lack of confidence in her ability to walk, became, soon after taking that remedy, able to walk about with vigor and fearlessness, and none of her muscles showed any abnormal movements. Spring had arrived meanwhile and enabled the patient to take frequent walks in the fresh air. Soon after I ceased my frequent visits and the administration of *Cuprum* and only continued the irrigation for a few weeeks longer, which I then changed to cold ablutions all over, thereby materially assisting the vigorous development of the whole body.

I desire yet to relate how I attained my knowledge of the cold water application. The above mentioned very difficult case of high grade Chorea in the young man had withstood all medication and, at my wits end, I consulted various later works and among them the portly Vol. of Prof. E. Bauchut* director of one of the largest hospitals for children's diseases, who relates on pp. 123 a case of unusually pronounced chorea which he could not overcome until he applied a thin stream of Chloroform to the spinal column from the neck to the sacrum. When I applied his treatment in my case with undoubted beneficent effect, I was induced to substitute cold water for the chloroform by the complaints of the attendants who were unfavorably affected by the chloroform fumes permeating the sick-room. As the cold water seemed to answer the same purpose I naturally dispensed with the chloroform.—*Popul. Zeitschr. für Homœopathie Vol. XVIII., pp. 53.*

SOLIDAGO VIRGA-AUREA.

The following very valuable hint is to be found on p. 131 of Dr. Gallavardin's *Homœopathic Treatment of Alcoholism:* "A lady, by administering, morning and evening, an infusion of the dry leaves and flowers of Golden Rod (*Solidago virga-aurea*) tells me that she cured her husband of an affection of the bladder which had compelled him to use a catheter for a year or more. A friend of Homœopathy, not a physician, desired to test the efficaciousness of this plant. He caused the first dilution of its tincture to be taken three times a day by seven patients of from forty-two to seventy-four years of age, who had been

---

*Traité pratique des maladies des nouvean nés des enfants a la mamelle et de la seconde enfance. A. J. T.

obliged to catheterize themselves for weeks, months and years, and cured them so thoroughly that they had no relapses. Surgeons who spend much time in catheterizing such patients for months and years could often cure them much more rapidly by prescribing for them the remedy just mentioned." Dr. Gallavardin is a high potency man in his treatment of alcoholism, prescribing from the 200th to the 10,000th, but evidently he is not averse to using a remedy in the tincture or first dilution when he knows it to be efficacious in relieving suffering. It may be well to state here that there are a number of golden-rods in this country but the *Solidago virga-aurea* which has been found such an excellent substitute for the catheter is not among them; it grows only in Europe, the tincture being imported into this country by the Homœopathic importers. A most excellent paper on *Solidago virga-aurea* will be found on p. 205 of THE RECORDER for Septemmber, 1889, containing the experience of Dr. Buck with this remedy. The following are some of the symptoms of the remedy there given: "Pains in the kidneys; region of the kidneys painful upon pressure; feeling of enlargement and tension in the kidneys, also pains in the kidneys which extend forward to the abdomen and to the bladder. Difficult and scanty urination; urine dark, red-brown with thick sediment; stone and gravel, albumen, blood or slime in the urine; urine dark with sediments of phosphates; slightly sour, neutral or alkaline; urine with numerous epithelial cells or small mucous particles. Epithelial cells with gravel of triple phosphates, or phosphates of lime. Bright's disease."

COMFREY [SYMPHITUM] AND ITS USES.

In none of the Homœopathic treatises that I possess do I find any mention of the above remedy. I am surprised at this, for I believe it to be a very valuable one in certain cases. Its common name of *knitbone* seems to point to popular experience of one of its uses; but I believe its knitting, or uniting, power extends to muscular and other tissues of the body, as well as to the bones. Let me give two instances of my own personal experience. Many years ago I had an inguinal rupture on each side, not extensive ones, but causing a protrusion about the size of half a small walnut. After wearing a truss for some time, I bethought me of what I had heard of the uniting power of Comfrey, and made some tincture from the root, and rubbed it in. After doing so two or three times, the signs of rupture quite dis-

appeared, and the parts remained sound for about three years; when, from some cause or other, the right side broke out again, but as it did not give much trouble I neglected it for some time, and then tried the Comfrey tincture again, but this time without success. I suppose the ruptured edges had got too far asunder. The left side, however, which originally was the worse of the two, has kept sound ever since. I think this shows that a rupture, if not too extensive, and if taken in time, may often be cured by this remedy. The other case I have to relate was of a different kind. Five weeks ago I had a fall on my back, the whole force of which was concentrated on a small portion of the lower spine, through the intervention of the back pad of my truss. I thought for the moment my back must have been broken, the pain was so excessive; and not only the back, but diaphragm and all the organs below it suffered acutely for three or four weeks after the fall. But a fortnight after the fall I was for the first time conscious of a pain and tenderness higher up the spine, at a point, I think, where ribs commence, and on feeling I found a protuberance there, as if a partial dislocation had taken place there. I again thought of Comfrey, and had some of the tincture applied. The tenderness at the point subsided after two or three applications, and in a few days the protuberance disappeared. * * * On more careful examination I find that the point of secondary disturbance was higher up than I have described—two or three inches higher than the first insertion of the ribs in the spinal column.—*F. H. B.*, *in Homœopathic World.*

Farington, in *Clinical Materia Medica*, says: "*Symphitum* officinals is the proper remedy for bone injuries. For example, when a blow on the eyes injures the orbital plates of the frontal bone. It may also be administered in case of irritable stump after amputation; and also for irritability of bone at point of fracture." It may also be added that broken bones and bad sprains which give pain years after healing may often be completely delivered by rubbing with *Symphitum*.

Symphitum—imported tincture—may be had of Homœopathic importers.

CORNUS FLORIDA.

Cornus Florida is a drug of which not a great deal has been written. In Hale's *New Remedies* there is a short note about it, a still shorter one in the *Hand-book*, while in the *Encyclopedia* one page in the Appendix is devoted to it; in the last named

"John M. Walker, Philad., 1803, experiments on pulse" is the only authority quoted; flushing of the face, and an increased pulse are about the only symptoms noted by Walker in his six reported experiments, though "nausea" and "slight headache" are mentioned in one instance. Hale says: "The bark is intensely bitter, and among the common people is used largely as a tonic, and as a substitute for Quinine in Ague." Also: "I have used the tincture in *obstinate intermittents* where quinine had been abused, and found that when the following group of symptoms were present it usually cured. The ague paroxysm is preceded for days by sleepiness, sluggish flow of ideas, headache of a dull, heavy character. The paroxysms are attended by nausea, vomiting, and sometimes watery or bilious diarrhœa. In the chill there is cold, clammy skin; in the fever violent headache, with throbbing, stupor, confusion of intellect, and vomiting." He also adds: "In some old cases of dyspepsia, when the chief symptom is *acid pyrosis*, this remedy, like *Columbo*, *Chelone*, *China*, and *Nux*, will often effect very satisfactory cures." He recommends doses of the tincture during apyrexia and the 2n. or 3d. dilution during the paroxysm.

In Dr. Ghosh's little work on *Fevers*, noticed in this issue, *Cornus Florida* is treated at length. The symptoms given are the same as those by Hale excepting that during the fever is added "hot but moist skin." "It is very useful," says the author in obstinate cases of Intermittent Fever whose intermission is of long duration. "I was called upon to treat a case of Intermittent Fever at Mániktalá, in the suburbs of Calcutta, in which the patient suffered from it for nearly three weeks, when I saw him. He was nearly two weeks under Allopathic treatment. During the first week he took no medicine, under the impression that the fever would go of itself. Two weeks of Allopathic drugging with massive doses of *Quinæ Sulph.*, (5 to 10 grains per dose), every three hours, during intermissions, could not stop the fever. At last the parents of the patient thought of changing the system of treatment. On the 23d day of the attack I was called upon to treat the patient. On taking a history of the case, I could not hit at any particular medicine, so I came away giving him no medicine that morning; but asked the father of the patient to see me that afternoon. As I was going through the pages of Hale's 'New Remedies,' I found that almost all the symptoms of *Cornus Florida*, enumerated therein, were present in the case. So I gave three drops of the 6th potency in water for three doses only, a dose every three hours during intermission. All the three doses were given. The next day there was

no fever, but the patient felt more uneasy without the fever than he did with it. I was called again. When I saw the patient and examined him, I found no symptom of fever, but signs of much uneasiness and discomfort in the face of the patient. That day I prescribed no medicine, but told the father that it would be given after I had seen his son again the next morning. This case solely engrossed my attention, and after much thought I came to the conclusion (I do not know why) that it might be a case of drug aggravation. . The next day I saw the patient with fever on, with symptoms like before. I now prescribed only one dose of the same medicine (only one-quarter of a drop per dose in water) during intermission, and it was given as directed, and to my great delight there was no fever the next day. I treated this case in July, 1885, and since then there has been no relapse. From that time I have tried *Cornus Florida* in no less than eighty cases, and with very marked success. I must note here that wherever I prescribed this drug one, or two doses at the most, I succeeded; but where the patients were not satisfied without taking the medicine at repeated doses, their cases took a very protracted course until they were convinced that over-dosing kept the fever up. Such kind of longing for over-drugging is not rare even among medical men (Allopathic and Homœopathic) of some standing. My above statements have been corroborated by the very flattering results which a friend of mine here has been getting from its use, in obstinate cases of Intermittents, with marked intermissions, and in which Quinine and other well chosen medicines have failed. * * * I would also ask my readers to note the fact that more than one or two doses are likely to aggravate the symptoms, and I believe the 12th or 30th Potency is likely to work better than the 6th or still lower Potencies, and that its working power is in the quality but not the quantity of the drug." The part devoted to this remedy concludes as follows: "In November and December, 1887, however, I tried *Cornus Florida* in about five cases of Intermittents resembling those in which I said it was tried with success; but, to my utter astonishment, it made no impression whatever upon the fever, and the result was that the cases were all made over to Allopaths who cured them by *Quinæ Sulph.* Such being the case, I am led to the conclusion that Intermittent Fever, like Cholera, is not curable by the same remedies in different outbreaks, although they may bear the same symptoms."

Pulsatilla. Will remove the rattle in the throat of a dying person.—HATCH.

WHISKEY AND TOBACCO.

A contributor to the *Dixie Doctor*, C. H. Harris, M. D., of Cedartown, Ga., puts forth a plea for the use of whiskey in certain circumstances that is curious but will probably, if put in any extensive practice, raise a loud cry of disapproval. He says that thirty years ago a Texas doctor wrote that a small dose of whiskey three times a day would certainly prevent the spread of typhoid fever in a house or among those exposed to the contagion. Very few doctors paid any attention to it, but Dr. Harris says: "My own observation impressed me so favorably with it that I have as much confidence in it as I have of anything in medicine." A teaspoonful for children and two teaspoonsful for adults is the dose recommended. "Doctors, as a rule, are incorrigible skeptics and believe nothing beyond the realm of their own observation and experience. They don't usually concern themselves about what they see in the papers, and I very much fear I will fail in this attempt to secure a valuable fact which, from some unaccountable reason, has been overlooked by the profession. I earnestly invoke a fair and impartial trial of this simple and harmless plan of preventing the spread of typhoid fever."

Another heretic to the prevalent views of many reformers of the present day is Dr. G. W. Holmes, of Rome, Ga., who is quoted in the same journal as follows: "Smoking is not such an injurious and dangerous habit as has been claimed. All diseases are caused by germs; there can be no life except what comes from life. Now a person who smokes uses one of the best germicides and antiseptics; he is protected from the invasion of disease and is as a matter of fact less liable to contract disease than the man who does not smoke. During the war I was in charge of over five thousand soldiers at the post in Florida; there were marshes near by and the dysentery broke out among the troops raging with great virulence; I noticed that all the Irishmen who went about with clay pipes in their mouths didn't contract the disease. I smoked all the time and was free from it. So that smoking, instead of being objectionable, is in reality a good protective against disease, and then there is so much comfort and satisfaction in it that really the benefit is great. I have always smoked and believe it is a good thing. There is at least food for thought in its utility as a prophylactic against disease."

Apis In typho-malarial fevers *Apis* will remove the tenacious mucus from the throat, which is sometimes so troublesome. —HATCH.

CUPHEA VISCOSSISSIMA.

Dr. C. O. Munn, of Oxford, Ohio, called the attention of the Ohio Homœopathic Medical Society to *Cuphea Viscossissima*, a remedy introduced by Dr. A. A. Roth through THE RECORDER'S pages some years ago. Dr. Munn says: "It is not so much in the true choleric type of cholera infantum that *Cuphea* has its sphere of action, as in those cases arising from acidity of milk or food, with frequent *green*, *watery*, *acid stools;* child fretful and feverish, can retain nothing on stomach; food seems to pass right through the child. Or the case may be manifested by dysenteric stools, small, frequent, bloody, with tenesmus and great pain; high fever, restlessness and sleeplessness. In this class of cases the action of *Cuphea* is prompt and generally lasting—just such cases as try our patience and skill during the summer months. I have used this remedy for the past two years, and so great has become my confidence in it that I have lost my former dread of those cases. * * * *Cuphea* seems to have very little action in ordinary forms of diarrhœa. * * * *Dose:* 5 to 10 drops of the tincture, according to age, every hour until relieved, and then a dose after each stool until cured."

Rumex Crispus.—Dr. Cardoza's cure was that of a cough which only obtained during the day, but not at all at night. I was not aware that this peculiar symptom belonged to *Rumex*, and therefore it ought to be noted down by all Homœopathicians for future use. Most of the drugs, be it remembered, that produce cough in any great degree have *night* aggravations of some sort or another, and in greater or lesser degree. But here is a drug that has a dry, teasing cough all day long which disappears when the patient lies down to rest at night. We thank the doctor for calling our attention to it, as it is not found, as far as we know, in the provings of the drug."

"Another peculiar condition which was evolved in the proving of Rumex, is one that is evidently connected with indigestion, and which does not, to my knowledge, at least, belong so prominently to any other drug. I allude to the 'Lump in throat, not relieved by hawking or swallowing; it descends on deglutition, but immediately returns.' I have cured many cases of so-called dyspepsia with this remedy in various potencies where the above characteristic was a prominent factor."—*G. Carleton Smith, M. D., in Hom. Phys.*

Ring-worm Cured by Sepia.—A widow æt. 56, robust,

blonde, sanguine temperament, was afflicted with ring-worm on the right side of the face, which had spread over the nose, cheek and upper lip. Patient did not seem to mind it for a long time until the steady enlargement of the disfigurement compelled her to seek medical advice. She never had been subject to a cutaneous disease before, and her general health was unimpaired. I gave her six powders of Sepia 15, one to be dissolved each day in water and to be taken at morning, noon and night. No visible change was perceptible until patient had taken 18 powders. Then the herpetic eruption grew less, was cured and stayed cured.

A mason's apprentice, æt. 17, of phlegmatic temperament and of unusually slow and sluggish mind, was afflicted since 9 mos. with ring-worm on the right cheek which itched intolerably. His general health did not seem to be disturbed otherwise. For two months he was given Sepia 6, one powder in water daily to be taken morning, noon and night. When patient was relieved of his affliction without a recurrence.

DR. SCHWENKE, *of Kæthen, P. Z. f. Hom.*

It would seem that perseverence and the higher potency is one secret of success with Sepia.

"THEN, again, the cheapness of the medicinal tablets favors another tendency of the age—*i. e.*, physicians in many parts of the country are coming more and more into the habit of carrying their medicines with them; this is a primitive custom, but one which has, doubtless, given the Homœopathic practitioner of former days (if not of the present day) some slight advantage in the struggle for existence. There is a satisfaction, physicians say (who now rely on the triturates and seldom write prescriptions), in being able to dispense at the bedside, and in a safe and convenient form, the medicines indicated. Moreover, by adding a small increment to the bill, the cost of the medicine, with a fair percentage of profit, is recovered. Again, the tablets are supposed to represent a definite dose of the ingredient, and it is a convenience to the physician to know the exact amount of the drug which he is dispensing."—*Dr. E. P. Hurd.*

"THE DOCTOR publishes the results of the investigation of the committee of the British Medical Association relative to the average age of the different categories of drinkers—that is to say, those who refrain completely from alcoholic drink; those who indulge, more or less in moderation; and those who drink to ex-

cess. This committee handed in its report. Its cases are drawn from 4,234 deaths, which are divided into five categories of individuals, with the average age attained by each:

		Years.	Days.
1.	Total abstainers	51	22
2.	Habitually temperate drinkers	63	13
3.	Careless drinkers	59	67
4.	Free drinkers	57	59
5.	Decidedly intemperate drinkers	53	03

These figures show, singularly enough, that those who reach the shortest age are those who drink no alcohol whatever; after them come the drunkards, who only excel them by a trifle. The greatest average age is reached by those who drink moderately."—*Kansas City Med. Jour.*

"PATIENTS, particularly ladies, often have their lives almost made miserable by the appearance of the face which is such that it looks as if it had been greased. In this condition compare Natrum mur., Plumbum and Thuja carefully and you will be able to cure and bring happiness to your fair patient and coin and glory to yourself."—*A. McNeil, M. D., in Hom. Phys.*

THE time is coming when manufacturing pharmacists will find their profit in making a superior class of preparations, and not in cheapening the price. If my advice were asked I should say, never buy from a house that cuts prices.

You ask, what interest have you in the cost of drugs? And I answer, the interest of having good remedies supplied to our physicians. My teaching, whether written or oral, is based upon reliable and well prepared drugs. With an uncertain medicine we cannot have certainty in practice.—*Dr. Scudder in Eclectic Medical Journal.*

VETERINARY DEPARTMENT.

"**Heaves.**"—This name for a rather common disease among horses is not found in any of the Homœopathic veterinary works; in them it is designated by the less descriptive name, "broken wind," or a species of asthma. From Rush (*Vade Mecum*) the following points are taken: "The cough is short, suppressed, and so feeble that it can hardly be heard at any distance; it is also frequently attended with expulsion of flatus from the rectum; jerking respiration of a very peculiar character, consisting of one

inspiration and two expirations. Indigestion is a usual accompaniment of Broken Wind, as indicated by flatulence, the presence of undigested hay and oats in the dung, and an unthrifty, thin seedy appearance of the animal. When made to trot fast or draw a heavy load, the horse's flanks heave violently, and his respiration becomes wheezing, like that of an asthmatic person; this state continues for some time, and does not cease immediately on rest, as in Roaring." The cause of the trouble is "feeding the animal on hay and oats, the former being given in too large quantities, without any change of food." The best treatment therefore is to give the animal a frequent change of diet and let the food be of a good quality. *Arsenicum* is recommended for the wheezing and difficult breathing and *Nux Vomica* when the indigestion is marked "*Bryonia*" and *Ammon-caust.* may also prove useful. To this may be added that in the May RECORDER of this year a case is reported where *Lobeliæ acet.* was administered for "heaves" with excellent results.

Colic in Horses.—The landed proprietor P. in L. had met with considerable losses in horses on account of colic; in one year he lost two and in six months more even four horses. Then I recommended him to try Homœopathy, and since that time he has not lost any.

Sundry Cases.—A horse got loose one night and finding a bag of barley ate up the rations intended for four. The hostler never said a word, and the horse was given some bran in the morning and taken out in the field, where he ate a quantity of young clover. The animal was, of course, taken quite sick, but as it evidently had colic it was kept in motion and prevented from lying down. It looked as if it had to burst. It received *Aconite* 5, then *Arsenic* 5, and in the afternoon at four o'clock it took its feed again, defecated and was all right.

A horse harnessed at dawn had a heavy load to move and became very much heated. Then it stood for a long time without cover, and finally, when it reached the stable, was taken with violent spasmodic colic. The horse was drawn crooked, head drawn back, the tongue protruded and it could not rise. It received *Chamomilla* 5, and within an hour stood at the crib and fed.

A horse which over ate itself seemed to be at once in ariticulo mortis, it protruded its flabby tongue, the eyes looked as dead and were of a whitish color. It was led about and received *Aconite* 5 several times, when it as speedily recovered.—*Rev. V. in the Pop. Zeit. für Hom.*

A Cure of Blindness in a Dog.—Recently I made a fine cure in a magnificent Newfoundland Dog. A friend possesses such a dog and is fairly crazy about him. About four weeks ago I visited him and found him quite despondent, his favorite *Pluto* had became blind. I examine the dog and find a dense white covering over both eyes, he was stone blind. On inquiry I am told that *Pluto* had a festering sore on the head which was very much inflamed for several days. Presently the eyes became inflamed also and the animal became blind on both eyes. I comforted the owner, assuring him that his dog would regain the eyesight inside of a week. I ordered to be administered once every two hours two drops of the first dilution of *Cannabis sativa* in a teaspoonful of water and at the same time drop a few drops of this mixture between the separated eyelids every two hours. On the third day the dog commenced to see, for although the eyes still looked opaque he walked everywhere. In five days more the eyes were as clear as ever, not a trace of the opacity remaining. As *Pluto* was a well known and favored personality in the whole town this astonishing cure created much surprise.—*B. von Reichberger in Zeitsch. für Homeapathice.*

BOOK NOTICES.

The Health of the Skin: By C. B. Shuldham, M. D., Trin. Coll., Dublin. American edition, with a chapter on the Chief Skin Remedies and their Homœopathic Uses. By William Boericke, M. D. Philadelphia, 1890. 85 pages. Cloth. 50 cts.

In this work, designed for the laity, but which may be read with profit by doctors, Dr. Shuldham gives seventy-six pages of general advice on the skin and its troubles and how it should be cared for. To these Dr. Wm. Boericke adds seven pages, giving the general indications of the seven chief remedies for skin diseases. This chapter was most carefully written and will be found of great value. The little work sells at the "popular" price of fifty cents per copy, and the suggestions scattered through its pages ought to well repay anyone for the small outlay.

Essentials of Diseases, Eye, Nose and Throat. W. B. Saunders. Philadelphia, 1890. 276 pages. Cloth. $1.00.

This addition to the list of Saunders' Question Compends is divided into two parts. Part I, by Edward Jackson, M.D., Pro-

fessor of Diseases of the Eye in the Philadelphia Polyclinic and College for Graduates in Medicine, consists of 145 pages under the title "Essentials of Refraction and the Diseases of the Eye" and is written, like others of the series, in the form of questions and answers. Part II, "Essentials of Diseases of the Nose and Throat," is from the pen of E. Baldwin Gleason, M.D., Surgeon in charge of the Nose, Throat and Ear Department of the Northern Dispensary of Philadelphia. The value of each part is greatly enhanced by a very complete index.

Essentials of Anatomy and Manual of Practical Dissection, together with the Anatomy of the Viscera. Prepared Especially for Students of Medicine by Charles B. Nancrede, M.D. Third Edition Revised and Enlarged. W. B. Saunders. Philadelphia, 1890. 388 pages. Cloth. $2.00.

Although the number of pages is given at 388, yet in reality 488 would be more accurate as the text matter is preceded by thirty colored plates which, with their description, occupy nearly 100 pages. These plates, which first catch the eye on opening the book, are really works of art, done in three colors and impressed on fine plate paper; the editor, who supervised them, is right in saying "we believe that those presented in the following pages are unrivalled in excellence, except in the large cumbersome and expensive charts, which are not adapted to the students' purposes. The study of anatomy must be grounded upon dissection. What the eye sees in a moment is more indelibly impressed upon the brain than the most minute and accurate description. Hence, after dissection or the examination of preparations would come trustworthy illustrations. By a study of these the student remembers not words but facts." In addition to the colored plates there are 180 wood cuts scattered through the text. The text itself is "based upon the last edition of *Gray's Anatomy*." Following the text matter is a collection of some sixty odd Osteological plates taken from *Gray*. Certainly a cheap book at the price.

Fevers and Their Treatment on Homœopathic Principles. Based mainly on the Results of Seventeen Years' Practice as a Homœopath. By Radha Kanta Ghosh. B. B. Mukhurji & Co., 25 Conwallis St., Calcutta, India. 1890. 194 pages. $1.25.

Dr. Ghosh's latest work is divided into three parts. Part I. treats of fevers like typhoid. Part II., of malarial fevers, yellow fever, etc., and Part III., of measles, small-pox, scarlet fever, etc. It is written in a singularly temperate and courteous tone and with an entire absence of dogmatism. One class of fevers after another are taken up, the symptoms carefully described and

remedies noted which were administered and what were the results. Elsewhere in this issue of THE RECORDER will be found a quotation from the book which will give readers a good idea of its style. We fancy it will prove to be an exceedingly valuable work to practitioners in India and not without interest and value to their American and English brethren. The work is not on sale to our knowledge in this country, but if any physician desires a copy it can be ordered for him by his pharmacist. The size is about 12mo. and the binding cloth.

The Stepping Stone to Homœopathy and Health, by E. H. Ruddock, M. D. New American Edition. Edited and enlarged with the addition of a chapter on diseases of women and the Tissue Remedies. By Wm. Boericke, M. D. Philadelphia, 1890. 256 pages. $1.00.

The American Editor says of his work: "Without in any way altering the arrangement or the scope of the book, the reviser has endeavored to bring it abreast of the times," thus addition rather than subtraction has been the editor's task. Of this class of works he says: "Such popular treaties are of great use to Homœopathy—are its most successful missionaries—and prepare larger and wider spheres for active work for Homœopathic physicians." The book has an excellent Clinical Directory and Index, and is altogether a most excellent "domestic"—family Homœopathy "up to date"—and certainly very low priced at $1.00.

On Fistula and Its Radical Cure by Medicine. By J. Compton Burnett, M.D. London, 1889. 141 pages. Cloth. 90 cents.

Dr. Burnett is a prolific writer, fortunately; for what he writes is worth reading—is interesting even to a general reader from its very style—but, more than that, it is something new and of substance and, best of all, it is stalwart Homœopathy. Dr. Burnett is no half-way, or half-hearted Homœopath; he believes in the great law wholly and entirely and to the doubting Thomases—the "but" and the "if" men—one of his works are as strengthening as a whiff of pure air to a tenement house baby. *On Fistula*, he says, "At first I did *not* quite believe it possible to cure fistula with medicines alone without any operation or topic applications, for I had been taught that to cure a fistula you must needs operate upon it. So you will *not* find anything about fistula in works on medicine." This being the case it will be seen that this little work is something entirely new. Further on he says, "With the lapse of time my own experience has

grown, and I have found that not only hæmorrhoids, but fistula can be genuinely and radically cured with medicines alone." Again: "And by Scientific Medicine I mean no more and no less than Homœopathy —." Mr. Howells tells us that no man is capable of criticising a book unless he knows more on the subject than the author and so the writer of this notice has no more to say on the book under consideration further than that in his opinion it is worth a place in a medical library.

The Family Homœopathist; or Plain Directions for the Treatment of Diseases. By E. B. Suldham, M.D. Seventh Edition. London.

After being out of print for some time the publishers, E. Gould & Son, have brought out the seventh edition of this compact little work. The paper and printing are excellent, and the cloth binding of this edition very tasteful. On account of its size it is well adapted for travelers who want their luggage complete yet light.

AMONG physicians of other schools Hughes' *Pharmacodynamics* is the most popular Homœopathic book published. It gives them a good insight into practical Homœopathy. It is a fine work. Those who want to examine the basis of Homœopathy should go to its corner-stone, Hahnemann's *Organon*. $7.00 half morocco or $6.00 cloth is the price of the former, and $1.75 cloth, of the *Organon*.

THE new *Physician's Price Current and Catalogue*, recently issued by Messrs. Boericke & Tafel, is undoubtedly the handsomest and completest work of the kind ever printed. It is mailed free *to physicians only*.

THE *Medical Advance* says of Gallavardin's *Homœpathic Treatment of Alcoholism:* "Personally we wish to thank the translator for rendering into English not only the first, but the best, work on this subject to be found in medical literature. The teaching is not only new to most of us, but is strictly Hahnemannian. * * * But there is not a single reader of the *Advance* who should be without this little work, from which he will glean much that will make him a better prescriber and a truer follower of Hahnemann."

Of Gallavardin on Alcoholism the *Homœopathic World* says: "The book will be found a mine of practical information and ought to lead to great improvements in the treatment of drunkards and drunkenness."

Homœopathic Recorder.

PUBLISHED BI-MONTHLY BY

BOERICKE & TAFEL,

1011 Arch Street, Philadelphia, Pa.
9 North Queen Street, Lancaster, Pa.

SUBSCRIPTION, $1.00 PER ANNUM.

Address communications, books, etc., for the Editor to E. P. Anshutz, P. O. Box 921, Philadelphia, Pa.

THE RECORDER is indebted to Alfred K. Hills, M. D., for the very valuable proving of *Paraffine*, published in this number. The translation was made by Dr. W. F. Robinson, while traveling in Europe, and sent to Dr. Hills, who placed it at the disposal of THE RECORDER. It seems to be a very thorough and old-fashioned proving and marked symptoms are developed that are very striking.

THE following appeared in a Southern medical publication: "*Oil of Mullein* (*verbascum.*)—This very fine and valuable oil is obtained by coving the fresh mullein blooms in pure olive oil, in an open-mouth bottle, and steeping a few days in the sun. It relieves ear-ache like magic. And many cases of deafness have also been cured by its continued use, by dropping 3 to 5 drops in the ears every day. For nocturnal enuresis, given in doses of 3 to 5 gtts. four times a day, it acts promptly in cases of children. It relieves irritable bladder also. Try it and report results." To this may be added that this "very fine and valuable oil" is not made in the manner described; such a product might have some virtue but it would not be *mullein oil.* What is said about its uses is correct enough, but *mullein oil* is wholly obtained from the bloom and is a dark aromatic liquid with no "oil" about it save in its old fashioned name.

TO THOSE who want to write a paper, but are at a loss for a subject, may be suggested, as a general topic, Pitch into New Remedies—not Dr. Hale's excellent book, but the remedies themselves, and include those who devote their time and money to making them known. Don't say anything against secret and patented, or trade-marked, remedies like *Antipyrine*, but sail into the simple remedies proposed by some luckless Homœopath, remedies that any one can procure who will take the trouble; tell him with severity that his remedy has not been proved yet, and tell it as something new, ignoring the fact that he said the same thing in his paper, or letter, wherein he brought out the remedy; relate a few cases wherein it has been administered and

failed—something that a respectable medicine never does—and from this data damn the new comer and obliquely the physician who called attention to it and cited some remarkable cures he had made with it. The remedy has not been proved, and is, therefore, a pariah and should be stoned without the camp. If it dies there is great satisfaction in calling attention to the fact in after years; while, on the other hand, should it live and wax great, as sometimes happens, no harm will result, for no one will remember the paper but the writer, and he can keep silent about it.

DR. WARREN B. CHAPIN, in a letter to the *New York Medical Journal*, very positively condemns *Chloramide*, saying that it is as apt to produce all sorts of unpleasant symptoms, some of them dangerous, as it is to produce sleep and, worst of all, it cannot be depended upon to act twice alike on the same patient. Dr. Chapin prefers *Sulphonal* instead; but *Sulphonal* has been known to produce death and certainly its sleep, from which the patient wakes apparently in a good condition and thoroughly refreshed, is followed by a state that is anything but gratifying—profound weakness and despondency. (See RECORDER, July, 1889, p. 169, and December, p. 284.) The best thing to do with these proprietary medicines is to let them alone.

DR. LEWIS in *The Medical Summary* draws the following picture of rheumatism for which he finds *Natrum salicylicum* (Salicylate of Sodium) to be a great remedy, and which he has used successfully for twelve years:

"Stiffness of one or more of the large joints, fever, alternating or accompanied by profuse acid sweats, joints begin to swell, and the surrounding tissues evince their inflammation by their redness, etc. Now we may expect the disease to shift from one joint to another. The individual may be suffering agony with the left knee, and in a few hours the pain has left that joint, only to appear in the limb opposite." After a dose an hour for five or six hours "the pains leave and your patient will bless you." While not definitely stated, the strength of the remedy he uses seems to be equal to the first decimal.

A FEW extra copies of this issue of THE RECORDER are mailed to physicians of other schools; the journal has a surprisingly large number of liberal physicians on its subscription list, presumbly because they find it to their professional interest to keep an eye on Homœopathic medicine and can do this more effectually by subscribing to THE RECORDER than by any other means. Subscriptions received during the remainder of this year will be dated from January, 1891, Vol. VI, and remaining number of this Vol. V (November 15, 1890, issue) will be mailed free. Address, Boericke & Tafel, 1011 Arch street, Philadelphia, Pa.

THE
HOMŒOPATHIC RECORDER.

VOL. V. PHILADELPHIA AND LANCASTER, NOV., 1890. NO. 6.

AN OFF-HAND STUDY OF THE SALTS OF BARIUM.

BY SAMUEL A. JONES, M. D.

It is indisputable that we do not make such therapeutical applications of the salts of Barium as their pathogenesies designate. These remedies were introduced into our practice as early as 1824, yet Boenninghausen says, in his monograph on Whooping Cough: "This remedy certainly belongs among the polychrests, is as yet, however, too little used and hence is but little known."

Hering bears similar testimony: "Very few cases have since been published, notwithstanding the masterly analysis of Stapf in his preface." Even so intelligent a gleaner as Hughes frankly admits "The main interest of Barryta carbonica in my eyes lies in its influence on the tonsils." He adds, "it is also considered a valuable remedy for senility, so far as this is premature and therefore morbid;" it seems to be peculiarly adapted to the aged, and is of value in paralytic affections, and in scrofulous diseases. He also makes mention of "its striking remedial effects, amounting almost to a cure," in a case of abdominal aneurism; and he gives a graphic paraphrase of Guernsey's recommendation of it as "especially suitable to dwarfish subjects, of stunted growth both in mind and body."

Stunted growth, both in mind and body, and *premature senility* are phenomena which no thoughtful physician can for a moment ignore. The origin of such conditions must be in the very roots of life; for only arrested, or perverted, nutrition can give rise to them, and their successful treatment would demand the highest exercise of our art. Then these questions naturally arise: are such conditions of infrequent occurrence, or is this remedy inefficacious, or have physicians remained in ignorance of this remedy?

Such considerations have lately interested me, and I am therefore led to offer you on this occasion such an introduction to the

study of the salts of Barium as my limited library will enable.*

And, first of all, we will glance at its history and learn some little concerning the repute which it has had of men. I find this part of a drug study of much value to myself. Not seldom do I find a remedy in desuetude; ignored or even despised; and yet a little research shows it to have played a lusty part in the past and to have made an even unusual noise in the world of medical letters. It claimed consideration then on the score of what certain men's "experience" testified of it, and yet, despite all this experience-testifying, the much-vaunted remedy has failed to secure an abiding place in Therapeutics—the besom of Time has swept it to moulder on the rubbish-heap. From all of which I gather that it is not the drug that lies, but men which bear false witness, calling it "experience;" and I conclude that much of your "experience" and of mine will doubtless go the same way; but this is becoming "personal!"

The muriate is the first of the Barium salts that was used in medicine. It was introduced by Crawford, in 1790, as a remedy for scrofula which afforded remarkable results when other agents of good repute failed utterly. Of course, there was a stretching-out of hands to the "new remedy:" we have seen the like in our day, and it will be seen again after we are gone. However, Dr. Crawford's results with the Chloride of Barium attracted much attention, and in 1792, Hufeland, then physician to the Duke of Saxe-Weimar, published, at Erfurt, a quarto volume, *On the Use and Effects of the Muriated Barytes in Different Diseases.* But even in the very year when Hufeland is lauding it in Germany, Ferriar is publishing his *Medical Histories and Reflections* in England, saying of muriated barytes: "The high character with which this medicine was ushered into practice induced me to order it in several scrophulous cases. It is needless to give a particular account of my observations, for I have never found any sensible effect from it, even in doses of twenty drops given twice or thrice a day, except in two cases."

[Observe, if you please, that there is no endeavor to specify in what manner these two successful cases *differ* from those in which the remedy was useless. Remember who taught the ab-

---

* "On this occasion." Eight years ago; a society of physicians and surgeons; hence the style, which I have not cared to change. O fleeting Time and inexorable Death! Eight short years, so swiftly flown, and he who listened so intently then, now hushed "in cold obstruction." Even so shall it be until the Infinite Purpose is fulfilled; meanwhile, patience, and courage, and hope, and the light that never shone on land or sea shall dawn for us all.

solute necessity of such discrimination, and honor his memory.]

A special volume on a new remedy by a Court physician was a noteworthy event, and in the year following, 1793, one Johannes Augustus Schmidt made the muriate of baryta the subject of a medical dissertation. The appearance of two special treatises on a remedy within four years from its introduction shows that the new drug was receiving a full share of professional attention.

Nineteen years later, in 1812, it had a scientific investigation, as a poison, by Sir Benjamin Brodie; and in 1814 its toxicological energy was so little known to the profession at large that in the first edition of his *Treatise on Poisons* Orfila introduces it as follows: "It is extremely useful to fix the attention of men of science on Barytes and its compounds. Being endowed with the most energetic poisonous properties, some of the preparations of this kind produce death in a very short time amidst the most excruciating pains and violent convulsions; it is then of the utmost importance that those physicians who employ them in certain scrofulous and lymphatic affections, etc., should understand perfectly their effects, and the means of preventing the serious symptoms to which they give rise." [Observe again, if you please, a characteristic of "regular" practice; a new remedy is introduced, and shortly the toxicologist has it in hand in order to save the race!] Since the publication of Orfila's *caveat* the salts of Barium have had due attention from all toxicologists.

In 1815 Michael S. Griffa published an inaugural dissertation *On the Use of Muriate of Baryta and the Muriate of Lime in Scrofula;* and in the same year the poisonous property of the Barium carbonate was recorded by Parkes.

Nine years later we have the first mention of a Barium salt in Homœopathic literature. Stapf and some of his friends had made provings of the *Barium acetate*, which he published in 1824 in the third volume of his Archives, together with "some additional observations of Hahnemann's on *Baryta muriatica*."

In 1828 provings of *Baryta carbonica* appeared in the first edition of Hahnemann's *Chronic Diseases;* the pathogenesis having 108 symptoms, which were published in conjunction with the 254 symptoms previously obtained by Stapf and his friends. In 1835 *B. carbonica* and *acetica*—by a mistake some symptoms of *B. muriatica* were included without being distinguished from the others—appeared in the second edition of the *Chronic Diseases*, and, owing to subsequent provings, the symptoms had increased to 799. Just here it is worthy of note that of those 799 symptoms only four are cited from old school authorities; and as Hahnemann was not averse to including symptoms obtained from

the use in disease, it would appear that Hufeland's treatise, and the special dissertations, as well as the journal articles, could afford but little aid to positive therapeutics.

We learn from Hering that the first separate publication of the pathogenesis of *Baryta muriatica* was the Allentown *Correspondenz Blatt, anno* 1836, and, in the English language, in the Allentown translation of *Jahr.*, issued in the same year, according to the title-page, though Hering says it was in 1838.

This history is by no means exhaustive, nor can I make it complete. I can say only that Crawford's original paper received a noted degree of attention. In Great Britain, Pearson, Clarke and Hamilton published observations confirming Crawford's recommendation of it, and on the continent is found able and ardent advocates of Hufeland, Fourcroy, Goering, Peterman and Schmidt. On the other hand, Ferriar, Henke, Kretschmer, Richter and others declared it inoperative, while Arnemann and Girtanner condemned it as "productive of highly injurious and even poisonous effects. At a still later period the Chloride of Barium was made the subject of clinical investigations by Professor Scassi, of Genoa, and in Italy by Mojon, Nongiardini, Ferrari and others, and with good results. The benefits obtained from it by these investigators led Lisfranc to try it at *La Pitié*, and Trousseau says "with incontestable success."

Amongst American authors on Materia Medica I cannot find one who advocates the claims made for the Chloride of Barium. Chapman declares that he has never been able to get any results from it, and Eberle writes of it solely from foreign testimony—giving statements *pro* and *con*. Professor John Redman Coxe, in his Dispensatory, asks if the muriatic acid is not the agent to which, in all the muriated remedies for scrofula, the benefit must be ascribed. Before to-day I have stigmatized this Coxe as a literary thief, and this is another instance in proof thereof, for, in writing of muriated Barytes, in 1792, Ferriar observed: "I cannot help suspecting that the only benefit to be expected from it must arise from the action of the acid, either not completely saturated, or not destroyed as a tonic, by the mineral. Several patients whom I now attend for scrophulous complaints are now taking the acid alone with apparent benefit who had used the muriated Barytes without experiencing the smallest alteration in their health."

The older Wood, Stille, H. C. Wood, and Bartholow completely ignore the remedy; and even the light-fingered Ringer has not appropriated anything regarding it from the literature of his own school, or, what is more singular, from that of ours! This

remedy, then, in the school that introduced it, has ran its course and has been thrown aside in less than three-quarters of a century. Why is it not doing to-day for a Ringer, a Wood, and a Bartholow that which it did for a Crawford, a Hufeland, and all who praised it, down to Lisfranc? Simply because clinical experience without the light of the law of similars is a delusion and a snare.

"Experience is said to be the mother of wisdom. Verily she has been in medicine rather a blind leader of the blind; and the history of medical progress is a history of men groping in darkness, finding seeming gems of truth, one after another, only in a few minutes to cast each back to the vast heap of forgotten baubles that in their day had been mistaken for verities."

Evidently, there is experience and experience, and such a choice as there is declared to be between deacons; and in these days, when we hear so much about affiliation with the old school, let us not forget who it is that will be the gainer thereby. They can offer us in therapeutics "a vast heap of forgotten baubles" which *they* have one by one "mistaken for verities," and one by one flung away because, forsooth, *they* have not learned to discern them as the verities which of God's truth they are. Certainly, most certainly, not we are the beggars at the gates; we have no inheritance in any of their "delusions;" in whatsoever pertains to the cure of disease we can try experience by LAW and exclude the false witness. History is with us; truth is with us; and we need only to be true to our inheritance; we must not barter our birthright for any mess of pottage whatsoever.

Let us now briefly enumerate the diseased conditions for which emperical medicine once, and blindly, recommended the Chloride of Barium:

1. In all cases of scrofula, and especially in the most inveterate forms.

2. In obstructions [of glands] and in [glandular] tumors as well as neoplasms.

3. In cutaneous diseases; herpetic eruptions, scabies, porrigo, schirrus.

4. In malignant venereal ulcers.

5. In white swelling.

6. In amenorrhœa.

7. In mania.

8. In cases of worms.

You will observe that in all these instances the neurotic action of the salts of Barium is not considered. It figures only as an alterative, or, take the term of the older writers, as a "stimulant

deobstruent." Brodie had called attention to it as a paralyzant, but his contemporaries saw nothing in the hint.

With Brodie began the era which inaugurated the scientific investigation of the salts of Barium. He was followed by Orfila, and then come Schloepfer, Gmelin, Huzard and Biron, Blake, Campbell, Pelletier and Kramer. For our latest and most profound researches we are indebted to Onsum, Cyon, Mickwitz, and Boehm.

From historical considerations, I shall quote entire the initial experiments by Brodie:

"Ten grains of the Muriate of Barytes rubbed very fine, and moistened with two drops of water, were applied to two wounds in the thigh and side of a rabbit. In four minutes he was evidently under the influence of the poison. In a short time he became giddy; then his hind legs were paralyzed; and he gradually fell into a state of insensibility, with dilated pupils, and lay in general motionless, but with occasional convulsions. The pulse beat 150 in a minute, but feebly, and it occasionally intermitted. He was apparently dead in twenty minutes from the time of the application of the posion; but on opening the chest the heart was found still acting, and nearly three minutes had elapsed before its action had entirely ceased.

"An ounce and a half of a saturated solution of Muriate of Barytes was injected into the stomach of a full-grown cat, by means of an elastic gum tube. In a few minutes it operated as an emetic. The animal became giddy, afterwards insensible, and lay with dilated pupils, in general motionless, but with occasional convulsions. At the end of sixty-five minutes from the beginning of the experiment he was apparently dead; but the heart was still felt through the ribs, acting 100 times a minute. A tube was introduced into the trachea, and the lungs were inflated about 36 times in a minute; but the pulse sank notwithstanding, and at the end of 7 minutes the circulation had entirely ceased.

"From these experiments I was led to conclude that the principal action of the Muriate of Barytes is on the brain; but in the first the pulse was feeble and intermitting; in the second, although the artificial respiration was made with the greatest care, the circulation could not be maintained longer than a few minutes. These circumstances led me to suspect that, although this poison operates principally on the brain, it operates in some degree on the heart also. Further experiments confirmed this suspicion. In some of them the pulse soon became so feeble that it could scarcely be felt, and its intermissions were more frequent; but in

all cases the heart continued to act after respiration had ceased; and the cessation of the functions of the brain was therefore always the immediate cause of death. When I employed artificial respiration, after death had apparently taken place, I seldom was able to prolong the heart's action beyond a few minutes. In one case only it was maintained for three-quarters of an hour. I never by these means succeeded in restoring the animal to life, although the experiments were made with great care and in a warm temperature. In some instances, after the artifical respiration had been kept up for some time, there were signs of the functions of the brain being restored; but the pulse, notwithstanding, continued to diminish in strength and frequency, and ultimately ceased.

"I shall detail one of these experiments, as it seems to illustrate the double action of this poison on the nervous and vascular systems.

"Some Muriate of Barytes was applied to a wound in the side of a rabbit. The usual symptoms took place, and at the end of an hour the animal was apparently dead; but the heart still continued to contract. He was placed in a temperature of 80°, and a tube being introduced into the nostril, the lungs were artificially inflated about 36 times in a minute.

"When the artificial respiration had been continued for four minutes, he appeared to be recovering; he breathed voluntarily 100 times in a minute, and showed signs of sensibility. The voluntary respiration continued about nine minutes, when it had ceased, and the animal was again apparently dead; but the pulse continued strong and frequent. The lungs were again artificially inflated. At the end of four minutes the animal once more breathed voluntarily 100 times a minute, and repeatedly moved his limbs and eyelids. The pulse became slower and more feeble.

"In a few minutes the voluntary respiration again ceased, and the artificial respiration was resumed. The pulse had fallen to 100 and was feeble. The animal again breathed voluntarily; but he ceased to do so at the end of five minutes. The lungs were inflated as before; but he did not give any signs of life, nor was the pulse felt afterwards. On opening the thorax, the heart was found to have entirely ceased acting.

"A probe having been introduced into the substance of the spinal chord, it was found that, by means of the voltaic battery, powerful contractions might be excited, not only of the voluntary muscles but also of the heart and intestines, from which it may be inferred that the Muriate of Barytes, like arsenic, affects

the circulation by rendering the heart insensible to the usual stimulus, and not by destroying altogether the power or muscular contraction.

"The Muriate of Barytes affects the stomach, but in less degree than arsenic. It operates as an emetic in animals that are capable of vomiting; but sooner when taken internally than when applied to a wound. In general, but not constantly, there are marks of inflammation of the inner membrane of the stomach, but not of the intestine. In many instances there is a dark-colored coagulum of blood lining the whole inner surface of the stomach, and adhering very closely to it, so as to have a good deal of the appearance of a slough; and this is independent of vomiting, as, where I met with it, it occurred in rabbits.

"The same circumstances, from which it may be inferred that arsenic does not produce its deleterious effects until it has passed into the circulation, lead also to that conclusion with regard to the Muriate of Barytes."

Such are Brodie's experiments; and he has the merit of first discovering that the salts of Barium are *a cardiac poison*.

I will now cite one of Orfila's experiments: "At five minutes after one o'clock, a small dog was made to swallow 33 grains of Caustic Barytes reduced to a fine powder. At 1:15 the animal was lying on his belly, and he appeared to suffer considerably. At 1:45 he vomited with much effort, a small quantity of mucous matter of a greenish color mixed with blood; he had the hiccup, and uttered cries excessively plaintive. At 2 o'clock he was in such a state of insensibility that he might have been taken for dead; he might be pinched without giving the least sign of pain; his limbs, when lifted and left to their own weight, fell like an inert mass of matter; the pupils were dilated. At 2:25 he vomited a small quantity of greenish-yellow matter, after making violent efforts; his breathing was excessively deep, and he still continued to moan.

"*Post mortem*. The mucous membrane of the stomach was of a deep red color throughout its whole extent, and exhibited, in that portion next to the pylorus, two black spots formed by venous blood extravasated upon the muscular coat. The duodenum and the other intestines were in their natural condition. The lungs were of a deep red color, and towards the posterior lobes their substance was crepitating."

I turn now to some quite recent poisonings by Woodman and Tidy:

1. Ten grains of Barium Nitrate were given to a rabbit by the mouth. It died in an hour. Dilatation of the pupils is re-

corded, and the following *post mortem* appearances: Brain, lungs, and liver congested. The stomach inflamed and rotten. The rectum very much congested.

2. Five grains of Barium Nitrate were given to a rabbit by the mouth. In 2 hours convulsions, violent purging, dilated pupils. Died in 26 hours. The brain was found to be normal; lungs and liver congested; stomach inflamed and very rotten. No apparent change in small intestine, but the rectum was very much congested.

Thirty grains of Barium Nitrate were given to a small terrier dog. In 2 hours insensibility, with vomiting, purging and convulsions. Pupils dilated. Died in about 4 hours. The brain was normal; the lungs, liver, stomach, and duodenum congested. The rectum was intensely congested.

Ten grains of Barium Nitrate were given to a dog by the mouth. No marked symptoms for 17 hours, then violent convulsions, vomiting and purging occurred; and in 28 hours paralysis set in. He recovered in 4 days.

Twenty grains were given to another dog. Vomiting and purging in 3½ hours, and convulsions in 6. Recovered in 2 days.

Another dog received 30 grains. In 22 hours there were convulsions and purging. He recovered in 2 days.

[My object in citing these cases is to emphasize the fact that in lethal experiments not one animal but many are required, and also to insist that all the phenomena shall be accepted, and even in single instances.]

A large dog was given 60 grains of Barium Nitrate. In 8 hours he had convulsions and purging, and he passed a large quantity of urine. In 23 hours paralysis of the hind legs ocurred. He recovered in 2 days.

To another large dog 120 grains were given. In one hour there were convulsions, purging, and vomiting. He had great thirst, and voided a large quantity of urine. Death in 2½ hours. The brain was normal. The lungs, liver, kidneys, all the intestines, and especially the rectum, were deeply congested. The bladder was empty.

Note, if you please, the fact that this large dose produced congestion of the intestines, and that it is the only instance of that effect. Observe also that of the dogs which died no brain lesions are recorded; a fact that necessitates lethal provings on different species of animals.

Dr. Campbell introduced 12 grains of the Carbonate of Baryta into an incision in the neck of a cat, and on the third day there was languor, slow respirations, and a feeble pulse; towards eve-

ning the animal became affected with convulsions of the hind legs; had dilated pupils, and death followed not long afterwards. [Christison.]

Furthermore, in all the animals, which in Dr. Campbell's experiments were killed by the application of the Muriate of Baryta to wounds, the brain and its membranes were much injected, and in one of them the appearances were precisely those of congestive apoplexy. [Christison.]

Gmelin observed in his experiments slight inflammation of the stomach, and marked symptoms of an action on the brain, spine, and voluntary muscles. He found the voluntary muscles destitute of contractility immediately after death; yet the heart continued to contract vigorously for some time even without the application of any stimulus. [Christison.]

The Muriate, when given in a dose of two drachms daily, produced sudden death on the 15th day without any previous symptoms of note.

From his experiments Blake pronounced the salts of Barium to be "the most powerful of all the inorganic poisons in their action on the heart, when they are injected into the veins. A quarter of a grain of the Chloride appreciably depresses arterial action; 2 grains completely arrest the heart's action in 12 seconds and when it is injected back into the aorta from the axillary artery, it causes at first some obstruction to the capillary circulation, but soon arrests the action of the heart, as when it is introduced into the veins."

The next investigations in this direction were made by Onsum in 1863, Cyon in 1866, Blake, of San Francisco, in 1874, Micwitz, 1874, and Boehm in 1875.

Hoppe Seyler had found that a dog, which died two weeks after the administration of Carbonate of Baryta, presented "numerous hæmorrhagic spots in lungs, the tissue of which was breaking down." Onsum sought to show that "the poisonous action of these salts is primarily on the lungs, and that particles of an insoluble mineral compound become precipitated within the blood, and cause impaction of the branches of the pulmonary artery. Carbonate of Baryta was given to a rabbit in increasing doses. When the quantity amounted to 3 grains daily, symptoms first appeared. Five hours after the poison was swallowed the animal was found lying motionless, with the respiration much quickened. Sensation appeared to be diminished. The difficulty of respiration and the paralysis increased, and the temperature fell, till in 6 hours the animal died. Small coagula were found in the branches of the pulmonary artery. Portions of the lung sub-

stance were firm, not crepitating, and redder than the normal tissue. Miliary ecchymoses were found on the surface of the lungs, and also in the stomach. Other experiments gave similar results."

According to Onsum "the symptoms always commence in the lungs, the respiration becomes quicker and less deep, and the inspiratory murmur is inaudible; the heart's action, however, becomes more frequent. Afterwards restlessness is noticed, with loss of power, which at last amounts to paralysis."

Boehm says: "The surmise of Onsum that the poison is converted in the blood into an insoluble sulphate, which, in an entirely mechanical manner produces emboli in the lungs, has been confuted by Cyon." Then the older teaching of Orfila that the Muriate of Barytes "produces death by acting upon the nervous system, and coagulating the blood," deserves notice; and we must bear in mind "the small coagula found in the branches of the pulmonary artery."

I, myself, set a high value upon Onsum's experiments, because they teach that the endermic application of the poison is the best method for introducing it, as, with moderate doses, death is not then so rapid, and the effects of the poison are more slowly developed; also that when the poison is given in a single large dose the most characteristic results are not produced; and, lastly, that convulsions are not observed when the doses are small and the poisoning gradual.

I turn now to a synopsis of the results observed in the joint researches of Mickwitz and Boehm.

After injecting Soluble Barium Salts into the lymph-sacs of frogs there occurred: "Mucous secretion from the skin, distension of the air-sacs, rigid extension of the limbs, convulsive movements under irritation, followed by relaxation and paralysis of the voluntary muscles first, and then those of respiration. Meanwhile the abdomen was tumid, and vigorous peristaltic motion was visible through its walls; the lungs were distended, and active irritation of the animal extorted from it a loud and unnatural cry.

"In mammals a similar injection into the veins immediately excites tonic and clonic convulsions, a discharge of urine and fæces, and general paresis, or if the dose has been excessive death in convulsions may ensue.

"By the stomach the poison does not exhibit any effect for 15 or 20 minutes, then alvine evacuations take place, the abdomen is distended, and the peristaltic movements of the bowels are visible.

"In dogs profuse salivation occurs, with vomiting and prolonged straining. Gradually extreme muscular debility follows, and the pupils dilate, but perception does not appear to be extinct until death, which is attended with slight spasms.

"The action of the poison on the heart is essentially the same in frogs and mammals. It occasions a contraction of the heart, which is more or less prolonged according to the dose given, and, as a consequence, augments the pressure of the arterial blood column. If, however, the dose is excessive the heart is paralyzed, and not made rigid."

Boehm says: "The investigations made by Mickwitz, under the direction of the writer, have defined somewhat more precisely the nature of this cardiac paralysis. Although it is not possible to determine from them whether this paralysis is confined solely to the cardiac nerves, or affects also the muscles of the organ, still, the cessation of the heart's action during *systole* has been shown to be a constant phenomenon both in warm and cold-blooded animals: in mammals (cats) especially, the carti-laginous consistency of the left ventricle is striking. In this connection the parity of action between barium and digitalis can hardly be overlooked. The blood-pressure increases enormously after the injection of small quantities of barium solutions into the veins, but the increase is, as a rule, preceded by a not inconsiderable lowering of the pressure. The increase often occurs very suddenly, and the pressure not infrequently becomes three or four times as great as before; at the same time the pulse becomes much more rapid. Increasing the dose then causes a steep sinking of the pressure-curve, and paralysis of the heart. Division of the spinal cord in the neck does not at all interfere with the development of this phenomenon, and hence it does not appear improbable that the muscular coats of the vessels, as well as the heart, are affected by the poison. This hypothesis receives support also from the state of excessive contraction into which the smooth muscular fibres of the intestine and bladder are thrown by the poison. Both organs lose their *lumina* completely in cases of barium poisoning. This peculiarity, which has not hitherto been noticed by any other writer, and which can be recognized even during life by the exceedingly active peristaltic movements of the intestines that are visible through the abdominal walls, seems to us to afford a sufficient explanation of the alleged gastro-intestinal symptoms (diarrhœa and vomiting). It indicates a certain preference of barium for the tissues of non-striated muscular fibres, or for the nerves contained in them, which is characteristic of the poison."

Just here it will be well to mention Blake's experiment with the Chloride of Barium; the subject thereof being a dog: "A solution containing 0.25 grs. of Chloride of Barium was injected into the jugular: 12″, the arterial pressure slightly increased; 1′, action of the heart slower. Inject 0.50 grs.; 10″, slight diminution of the pressure, heart's action fluttering; 14″, pressure increased 1 inch above the level before the injection. Inject 1 gr.: 11″, pressure diminishing with fluttering action of the heart; 14″, pressure again increased, heart's action slower and very irregular, two or three quick beats and then a number of slow ones. Inject 2 grs.: 12″, action of heart arrested; respiration continued irregular for 1′30″. It then became intermittent and ceased 2′45″ after the heart had stopped. On opening the thorax the auricles were contracting vigorously, and continued contracting for some minutes. The ventricles were still, and did not contract when irritated. The left cavities contained scarlet blood. Five minutes after the thorax had been opened the muscles [of the thorax] commenced contracting and continued in motion for fifteen minutes."

"This action on the muscles is most strongly marked after the injection of the salts of Strontia and Baryta, and shows itself sometimes in a curious manner. In one instance in an animal killed by Chloride of Strontium, there were no movements until ten minutes after death. The muscles of the ear then commenced contracting, so as to cause it to move; and from this point the muscular contractions spread until all the muscles of the trunk and limbs were in motion, and they continued contracting more than a quarter of an hour. The longest time after death in which I have observed these spontaneous contractions of muscles has been forty-five minutes; this was in the muscles of the penis and scrotum of a dog that had been killed by the injection of Chloride of Barium into the veins. It is probable that the occurrence of respiratory movements so long after death, in one instance seven minutes, is connected with the action of these substances on the muscles, as the contractions they cause are not simply contractions of individual muscles, but coördinated movements. This action on the voluntary muscles is curiously contrasted with their action on the muscular tissue of the heart."

I ascribe no particular to this curious post mortem phenomenon, and have cited it only in probable explanation of that reëstablishment of respiratory movements which Brodie had previously recorded.

Boehm shall give us the last deduction from this scientific holocaust: "In cold-blooded animals the other symptoms, caused

by the action of the poison on the nervous system, consist in paralysis of the voluntary muscles, which is, however, preceded by a peculiar state of rudimentary, clonic spasms.

Frequent tetanic spasms are seldom absent in animals. The disturbances of the respiration are evidently dependent upon the anomalies of the circulation which precede them.

We may fitly close this part of our off-hand study with a brief recapitulation of the chief effects upon the lower order of animals:

1. *Dilatation of pupils* appears to be a constant resultant. This phenomenon is due to irritation of the cervical sympathetic, and finds its chief value to us in this study, because it indicates the condition of the blood-vessels; their calibre being decreased from the tonic contraction of the muscular coat. This involves increased arterial pressure, and this, again, produces a slowing of the heart's action. Then the dilatation of the pupils is in consonance with the feeble, intermittent pulse and failing heart observed by Brodie and others.

"The zone of the spinal marrow, the wounding of which has an influence on the sympathetic branches, does not extend downwards below the level of the second dorsal vertebra; but at the present time its upper boundary cannot be specified with certainty." Bear in mind, also, that from the cervical sympathetic arise the three cardiac nerves which form the cardiac plexus.

2. *Motor and sensory paralysis* is a constant result. The motor paralysis is of the *ascending variety;* being first observed in the lower extremities. Then this action on the spinal cord must begin at a point not higher than the eleventh dorsal vertebra. From thence it proceeds upwards as the paralysis becomes general.

3. *Heart-failure* is a constant result of toxic doses. I do not call it *paralysis* when the ventricles are thrown into tetanic spasm; and I regard this condition as only an exaggeration of that tonic spasm which the Baric Salts produce in the arteries. It is called "paralysis" because of the lack of excitability evinced by the heart when irritants are applied to it. Why should we talk of paralysis when the extinction of "irritability" is death.

[TO BE CONTINUED.]

BLATTA ORIENTALIS.

Synonym: Indian cockroach.

Class: Insecta.

Order: Orthoptera.

Common name (Indian): Talápoka.

The *Blatta orientalis* is a common insect in India where it is found abundantly in the dwelling houses. It has rather a flat

body, from an inch to couple inches in length, deep brown colour. It can fly a short distance. The wings reach beyond the body and cover it completely, the feet have several segments and are provided with prickles.

Preparation.—The live animal is crushed and triturated as under class Ix of American Homœpathic Pharmacopœia, a tincture can be prepared as under class IV of the same Pharmacopœia.

This new unknown remedy has a curious anecdote connected with it. I call it new because it has not been mentioned in any of our medical works, although the use of *Blatta Americana* (American cockroach) as a remedy for dropsy has been mentioned in journals. The Indian cockroach is used not in cases of dropsy but in cases of *Asthma*, a most obstinate disease to deal with. In asthma it acts almost specifically. Before I further proceed to give an account of this new invaluable drug, I shall narrate here a short story, how it came into use. Some years ago an elderly gentleman had long been suffering from Asthma for over twenty years. He took all measures and tried different methods of both recognized and unrecognized medical treatments, but unfortunately all proved in vain. At last he gave up all treatment and was getting fits daily. He was brought to such a deplorable condition that he was left to suffer. He was in the habit of taking tea. One afternoon as usual he drank his cup of tea—afterwards he noticed that his oppression in the chest was much less and that he was feeling unusually better, so much so that he felt himself a different being. This lead him and his friends to inquire into the cause of it. He immediately inferred that the relief was due to the drinking of the *tea*, although he habitually drank the same tea but never before had experienced any such changes. So, this change he attributed to something in the tea. The servant who prepared the tea was sent for and inquired. His reply was that he made the tea as usual and there was nothing new in it. The residue of the tea cup was carefully examined, nothing was found there, but on examining the tea-pot a dead cockroach was discovered. So it was concluded that this *infusion* of cockroach did the gentleman a world of good. The very day he drank that *cup of tea*, he had hardly any fit of asthma at night, and in a few days he got entirely well to his and his friends' surprise. The accounts of his Providential recovery were communicated to some of his friends —one of them, not a medical man, but quite an enterprising gentleman took this into his head and resolved upon to try whether cockroach does any good to other asthmatic patients. For this purpose he got a lot of cockroaches, put them alive into

a quantity of boiling water and mixed after filtering the water when cool with almost the same quantity of the rectified spirit of wine, so that it might last for some time without getting soured This new mixture (or tincture) he began to try in each and every case of asthma that he came across. The dose was a drop each time, 3 or 4 doses daily, and more frequently during the fits of asthma. Within a short time he made some such wonderful recoveries that people began to flock from different parts of the country to his door. Soon the number of attendance was so great that he had to manufacture the medicine by pounds and all this medicine he distributed to patients without any charges. He has records of some of the cases.

Some two years ago a patient of mine asked me whether we make any use of *Telapoka* (cockroach) in our Pharmacopœia. My reply was that we use many loathsome insects as our remedial agents. I told him also that *Blatta Americana*, (American cockroach) I had heard, had been used in cases of dropsy but I had no practical experience with it. He then said the Indian cockroach is used in cases of asthma and he knew several cases had been cured with it. This struck me and I determined to try this in cases of asthma whenever next opportunity occured. For this purpose I got a lot of cockroachs, killed them alive, pounded to a fine pulp and triturated according to class Ix. of American Homœopathic Pharmacopœia, that is, two parts by weight of the substance and nine parts by weight of sugar of milk, giving Ix. trituration. Thus I prepare up to 3x trituration and also I make an alcoholic solution—a few live cockroaches were crushed and five parts by weight of alcohol poured over them—it was allowed to remain eight days in a dark, cool place, being shaken twice daily. After the expiration of that period the alcoholic solution was poured off, strained and filtered, when it was ready for use. I began to try both the preparations—a drop doses of the tincture and a grain doses of 1x, 2x and sometimes 3x, 3 or 4 times daily when there was no fit and almost every fifteen minutes or half hourly during the severity of a fit. Both preparations began to answer well and I was getting daily more and more encouraged about the efficacy of this new drug. I had the opportunity of trying quite a number of cases of asthma within this short time, the reports of which I wish to publish in the future, but for the present I am glad to say in many cases it acted almost specifically, that is, the whole trouble cleared away within a fortnight or so without recurrence. In some cases the severity of paroxysm was lessened and the recurrence of the fits took place at a longer

interval; in others again only temporary benefit was observed. This failure to benefit all cases alike I attribute to many circumstances. Some people did not, rather could not take the medicine regularly according to my directions owing to their untoward circumstances; some persons were suffering from other complications along with asthma; some again got temporary relief and in the meantime discontinued the medicine and came back again when there was a recurrence of the fits, that is, they did not continue the drug for sufficient length of time. Some cases again, not having derived immediate benefit, got impatient and discontinued the medicine without proper trial. Besides all these, I think individual idiosyncrasy has a great thing to do. The season of the year has some influence. It is usually observed in this country that those who are subject to periodical attacks of asthmatic fits are more prone to an attack, either during the full or the new moon, or at both the times. I believe if it is properly watched this fact will be evident all over the world. Same is true of some other diseases, as chronic cough, chronic fevers, rheumatism, either acute or chronic, gout, elephantiasis, other glandular enlargements, etc., get aggravated or are prone to aggravation during such changes of the moon. Then some people get more severe and frequent fits during the winter than the summer and the others more during the summer than the winter. Let me here tell you that the Indian summer is very different from either the English or the American. Some part of the Indian summer season is quite rainy and the atmosphere is saturated with moisture and other irritating ingredients, consequently a class of asthmatic people suffer more during this season. I noticed to this class of cases *Blatta orientalis* will prove most efficacious. I have used it in bronchial and nervous asthma with better success than the stomachæ. However, there is no specific drug for any disease and I do not consider it a specific for asthma, but I dare say, *Blatta orientalis* will prove efficacious in a majority of cases of asthma, leaving those cases aside that have individual idiosyncrasy, etc. I hope, it will have a better place in our Materia Medica than Arsenicum Ipecac, Lobelia, etc., in cases of asthma. I earnestly request that some of us should come forward and have the drug proven. In case we are in want of such enthusiasm, let us try the drug *empirically* when opportunity happens, and have the detailed records of each case published so that we may come to some practical data. I have more to say on the subject in the future.

D. N. RAY, M. D

65 Beadon street, Calcutta, India.

HELODERMA HORRIDUS.

If it is questioned by any one whether the bite of this hideous lizard is poisonous I think it is fairly answered by the statement of the following occurrence:

A happy family of six Gila monsters had been kept in a show-case for a couple months at a prominent store in this city. The animals had eaten heartily and had crawled around as circumstances required; still they slept most of the time and acted sluggishly. One day this case was removed out of doors and placed where the sun's rays poured sharply upon it. Within a short time these animals began to act queerly. They seemed excited and worked themselves in strange convulsive ways. Their tails, which hitherto depended as ornaments, now commenced to thrash, and the animals started upon a quick trot around the cage. As they touched one another they would snap. This was a new feature, as previously they had crawled over one another as over stones and the one trodden upon made no kind of a remonstrance. Soon one monster caught another and bit its legs and feet. A free fight ensued, each one biting and snapping at anything within reach. Within a few hours from the time of the placing of the cage in the open sunlight all the monsters were dead. Upon careful examination there was no wound of any size to be found, such as should have caused death. There was no severe injury; no loss of blood or of any vital fluid whatever. If these animals had not died from poison it would be hard to guess what was the cause of their death, and there was no other poison in the cage than that which they contained. It is not remarkable that there was no abrasion of the skin, as it must be remembered that the teeth are small, short and fine-pointed, about the size of a coarse sewing machine needle at its point, and the hide of the monster is as tough as that of the crocodile, but of smaller scales and also thinner.

The effect of the sun's rays will be seen to correspond to the well-known influence which the same agent has upon rattlesnakes and other venomous reptiles. A rattlesnake kept in a dark and cool place may be handled with comparative safety; but the same animal is extremely dangerous when he has been exposed to the sun's rays for a time.

Experiments have been made upon dogs in this section, and invariably when the monster has bitten a dog the victim is dead within a few hours. The symptoms generally given are as follows: First, the dog breathes heavily, and, his head hanging down, his tongue protrudes more than naturally. After a short

time he is unable to stand upon his legs; his head is then extended, probably to more readily gain breath, as the throat becomes swollen inside. A shuddering or shaking of the muscles, in an irregular manner, takes place occasionally, and the animal dies without any marked spasms or convulsions.

Mr. Vail, of Tucson, whose case was reported in THE RECORDER, has recovered from the bite he received about three months ago. The only perceptible result has been a swollen tongue, which seems unwilling to resume its former proportions. The treatment in his case was that so strongly recommended by European authority: profuse sweating by administration of Jaborandi. Mr. Vail says that his suffering was intense, the pain proceeding from the wounded part toward the head and back. Immediately after receiving the wound, which was upon his index finger, both the wrist and finger was tightly bandaged. Medical assistance was not procured for two hours. Then the wound was cleansed and dressed and the bandages reapplied. It was found that for three days those intense pains would shoot toward the head and spine upon giving any relief to the bandages.

It is generally understood that a victim who is pretty well "pickled" with bad rum will certainly die from the bite. Mr. Vail's case is a negative instance in favor of the theory. He was a man of temperate habits. An affirmative instance is that of a miner, living not far from here, who is supposed to have died a short time ago from the effects of a bite, after having laid in a lingering, death-like state for several months. He was bitten while drunk.

It appears that man does not die so quickly from the effects of this poison as other animals do, but that all cases well authenticated show a long, lingering, wasting sickness.

Yours, very truly,

CHAS. D. BELDEN, M. D.

Phœnix, Arizona, Sept. 8th, 1890.

CEANOTHUS IN LEUCORRHŒA AND SUPPRESSION OF THE MENSES.

A married lady, aged about 28, had menstruated first at the age of 14, when she was married. Since then she menstruated regularly every month for six years, but she did not bear any child, although she looked apparently healthy in every way. On the twenty-first year of her age, that is in June, 1876, she had an attack of malarious intermittent fever, in which her spleen got enormously enlarged. She was living in a village in the ma-

larious district of Jalpaigure, where her husband was employed under a jute-merchant. There she caught the poison of *Malaria*. She was *apparently* cured of the fever by large doses of Quinine, but the spleen remained enlarged. Since then she would every now and then get an attack of intermittent fever. In this way she suffered from fever for nearly two years, and, as a matter of course, she became very anæmic, lean and thin, and she looked as if jaundiced. Her brother, a native doctor, learning that his sister was thus ailing, brought her down to Calcutta for treatment. As long as she was with her husband she took patent medicines, supposed to be specifics for malarious fevers, the ingredients of which are known to the proprietors only, sometimes with some benefit, and sometimes with no benefit whatever. I was consulted. This was in August, 1887. When I examined the patient, I learned from inquiry that the fever was of the Quartan type. Her spleen was very much enlarged on all sides and so indurated that it felt like a stone. She was extremely anæmic and looked as if jaundiced like a chlorotic patient. She also had dysenteric-diarrhœa and œdema of the eyelids, hands and feet. She had no menses, but profuse leucorrhœa which came out like a stream since the first attack of the fever. The œdema led me to the suspicion of the presence of albumen in the urine, and on examination, an appreciable quantity of albumen was detected in the urine. I prescribed Arsenicum alb. 30., three doses daily. Arsenic was given in this way for a week and the fever stopped. I ordered the discontinuance of Arsenic for the next one week. The fever did not recur, but the diarrhœa continued. Arsenic was again prescribed for two weeks more. The diarrhœa was checked and the fever also did not recur. Œdema had also gone. On examination no albumen was found in the urine. Now the medicine was discontinued for two weeks. Still the fever did not recur, nor the œdema. But the leucorrhœa continued still very profuse and the menstruation also remained yet suppressed; the spleen also remained enlarged and indurated as before, and yet the patient began to gain flesh and blood. I prescribed Ceanothus ϕ, in five-drop doses internally, three times a day, as also over the spleen as an external application. In this way Ceanothus ϕ was continued for two weeks. It made no impression on the spleen whatever, but the leucorrhœa had gone, and the menstruation, which remained so long suppressed, reappeared on the 18th day of the administration of Ceanothus. She menstruated regularly every month for six months or so and there was no leucorrhœa during that period. The fever

did not return, but the spleen remained enlarged and indurated as before, in spite of Ceanothus treatment which was continued over four months; from a perusal of what has been extracted in Hale's "New Remedies" regarding Ceanothus from the *Atlanta Medical Journal*, as I took it to be like "Newton's apple" in the domain of so called charming remedies for intermittents, with enlarged and indurated Spleen, as I have already said in my treatise on "Fevers and their treatment on Homœopathic principles." In the middle of June, 1882, she caught cold and her menstruation was suppressed and leucorrhœa again commenced. The leucorrhœal discharges were so profuse and so corroding that the labiæ, perineum and the parts of the thigh which came in contact with the discharges, became quite ulcerated. There was also burning and scalding during micturition. Ceanothus was again prescribed in five-drop doses as before and continued for a fortnight. On the thirteenth day of the administration of Ceanothus leucorrhœa stopped, and on the eighteenth day menses reappeared. Since then she was menstruating regularly every month at the usual time, with normal discharge, but the spleen remained enlarged and indurated. The fever did not recur. The husband of the patient having taken service in Assam she also accompanied him there in June, 1883. From that time she had no leucorrhœa and her menstruation was regular till September following; when she conceived. In May, 1884, she gave birth to a healthy male child. The labor, I was told, was rather a tedious one. She did not menstruate till June, 1885, but had leucorrhœal discharge ever since the child was born. Again the patient began to lose flesh, and became so weak and anæmic, and her husband was so alarmed at the general debility and prostration of his wife that he at once came down to Calcutta for her treatment and consulted me again. When I saw her I noticed no fever, but the spleen remained enlarged and indurated as before; she was extremely anæmic; there were diarrhœa, œdema of the eyeids, hands and feet, especially the ankle-joints, and much urinary difficulties. I prescribed Arsenic 30., three doses daily. Arsenic was given for two weeks, and all the symptoms disappeared; except eulargement of the spleen, the leucorrhœa, and suppression of the menses, with occasional swelling of the sub-maxillary, axillary and inguinal glands which were painful. Ceanothus ϕ was again prescribed in five-drop doses and leucorrhœa went off in about three weeks and menses appeared, but the spleen remained enlarged and indurated as before. She went back to Assam in June, 1886. In March following she conceived again and in December following she gave birth to an-

other healthy male child. In February, 1888, the husband of the patient wrote to me to say that his wife had no other complaints than enlargement of the spleen which became painful every now and then, with occasional painful swelling of the sub-maxillary and axillary glands. I prescribed Cod-liver Oil, five drops noon and night, after meals, and advised the husband to give his wife a change to the Northwestern Provinces where she was sent. She remained there for nine months or so and got rid of her enlarged spleen, without any medication whatever. In February last, the husband of the patient wrote to me to say that his wife had no other complaints than occasional painful swelling of the sub-maxillary glands even on slight exposure to cold or night dews. I suspected scrofulous taint and accordingly I precribed Cod-liver Oil in five-drop doses, noon and night, after meals as before, which was continued for six months. The husband of the patient saw me here last week and told me that his wife was quite well, and that she had nothing to complain of regarding her health.

Seeing the very good results which I got from the use of Ceanothus in leucorrhœa and suppressed menses in this case, I tried it of late in ten or twelve cases of leucorrhœa and suppressed menses, coming from the malarious districts of Nuddea, Wurdwan and Hoogly, proceeding evidently from *malarial anæmia*, and I am glad to say all the cases were much benefited by this medicine except one, who died of chronic malarial infection in May last. I should, therefore, recommend that this medicine be given a fair trial by the profession in the treatment of leucorrhœa and suppression of the menses, proceeding from *malarial anæmia* and other causes of malarial origin, when opportunity offered. I am, however, sorry that I cannot endorse, from personal experience, the opinion expressed in the *Atlanta Medical Journal*, and quoted by Dr. E. M. Hale in his "New Remedies," regarding the efficacy of Ceanothus in intermittents, with enlarged and indurated spleen, because I have been singularly unfortunate in the treatment of the malady with this agent, as I have already said in my treatise on "Fevers and their treatment on Homœopathic principles," page 93.

The readers will kindly remember what I have said in my article on "Aurum Metallicum and Syphilis," published in page 145, No. 4, Vol. V., of THE HOMŒPATHIC RECORDER, of July, 1890, regarding the efficacy of Cod-liver oil in cases supposed to have constitutional taint, as that of Syphilis, Scrofula, etc. The case under review, I believe, supports me in that belief.

R. K. GHOSH, M. D.

70—1, Mániktalá Street, Calcutta, August 26th, 1890.

FERRUM PHOSPHORICUM.*

Whatever we may think of Schuessler's theory, as homœopathists we ought to be profoundly thankful to him for the introduction of *Ferrum Phosphoricum* into Materia Medica.

In his lectures on clinical medicine the late Professor Farrington spoke of ferrum phosphoricum as a "breech presentation" because it had been used by the profession before provings of it had been made. Dr. Houghton recently declared that we ought not to reject the remedy on that account. "There is many a man now doing cephalic service who came by a breech presentation; the remedy had no choice as to method of introduction into the medical world."

Enough has already been learned of its use to warrant us in employing it and to convince us of the importance of even more thoroughly proving it.

It is the purpose of this paper to give to the society a compilation of the indications for this valuable drug. The published works of Professors T. F. Allen and Farrington have been largely drawn upon. Though the latter gave no separate lecture upon this drug, yet with his wonderful clearness, here and there, when contrasting it with other remedies, he has given accurate indications for its use. Then, too, notes taken by your essayist from lectures by Professors Mohr, Betts and Goodno and Dr. Ivens of the Hahnemann Medical College, of Philadelphia, have supplied much of the material for the present article.

The most frequent mental symptoms are a vaguely expressed, restless, intolerant feeling and a sense of drowsiness. About the head there are sharp pains, especially on the right side, extending from right brow to right ear; also an aching vertex and extending over sides of the head, made worse by holding head down. It is indicated in meningitis when the pulse is soft and full and where there is marked drowsiness. It is also valuable for the violent headaches occurring during menstruation. In headache extreme sensitiveness of the head is a valuable symptom.

EFFECTS UPON MUSCLES AND JOINTS.

We find rheumatic pains in various parts, but especially in right shoulder. The pains are of a pinching character, with soreness in the socket and a weak condition of the arm. There are also shooting pains from the shoulder down the arm.

These symptoms remind us forcibly of *ferrum metallicum*, but

---

*Read at the regular monthly meeting of Onondaga County Homœopathic Society, September 2d, 1890, Syracuse, N. Y.

competent observers consider ferrum phosphoricum much superior here.

In inflammatory rheumatism, characterized by great soreness, many observers unite in declaring it superior to *arnica*. In rheumatic pains occurring in old people it will often be found indicated.

ACUTE INFLAMMATION AND THE RESPIRATORY TRACT.

Its effects upon acute inflammatory processes, especially of the respiratory tract, are the most useful of all. Schuessler recommended it as a substitute for *aconite*. Homœopathists should never confound the indications for these two drugs. *Ferrum phosphoricum* has a pulse that is full, round and soft. The discharge, if it is a mucous membrane that is involved, is blood-streaked. It is very valuable in that stage of inflammation described as dilatation of the blood vessels. Given at this stage it will often prevent further progress of the disease.

Thus in engorgement of the lungs it prevents subsequent pneumonia. The chest feels sore and bruised; the pulse is full and round—not rope-like as under *aconite*. Hence when a phthisical patient takes cold and becomes greatly prostrated *ferrum phosphoricum*, high or low, will quickly relieve the pulmonary congestion. So, too, in pneumonia when secondary congestion threatens to be the last straw that will decide the issue against your patient, *ferrum phosphoricum* will often come to the rescue.

In capillary bronchitis, if given early when there is restlessness, not quite as much anxiety as *aconite*, both lungs involved, fever high, skin hot, it may clear up the case in twenty-four hours.

It is also valuable early in pneumonia when the symptoms given above indicate it, especially when the patient is drowsy; also in those cases where bronchitis is prominent. Before leaving the respiratory tract we ought to notice its value in sub-acute laryngitis after *aconite* or *gelsemium* at the commencement of expectoration. In laryngeal phthisis it is secondary only to *arsenicum jodatum*. Before the stage of ulceration it is most valuable—the cough being severe and worse in the evening.

ALIMENTARY TRACT.

Its most constant symptoms of the stomach and abdomen are cravings especially for brandy which seems to relieve the stomach symptoms; nausea in the morning followed by heartburn and eructations of gas and a greasy fluid; much flatus in abdomen, stools soft and easy, pain in transverse colon.

It has been successfully used in dyspepsia with loss of appe-

tite, nausea and vomiting after eating, aggravated by ingestion of acids. It is indicated in cholera infantum with red face, full soft pulse; stools watery or even bloody. Sometimes in summer complaint of children, the blood vessels become greatly distended; stools watery—containing mucus and blood. There may be a little urging to stool but no tenesmus. When this latter symptom comes, *ferrum phosphoricum* ceases to be the remedy. Though it again becomes useful in these cases later, if hydrocepholoid symptoms appear—when the face is flushed, child is drowsy, the eyes suffused with blood, and the characteristic pulse.

URINARY SYMPTOMS.

It is one of the remedies to be considered in hemorrhages from the bladder; is valuable for an irritable or inflamed bladder, with frequent urging. This last symptom is especially aggravated by standing. Also to be thought of in retention of urine in children with the characteristic fever.

While *ferrum jodatum* is useful for nocturnal enuresis, *ferrum phosphoricum* is better for diurnal with symptoms otherwise the same.

FEMALE COMPLAINTS.

It has proven useful in dysmenorrhœa with sacial pains, headache, frequent urging to urinate and pains in left ovary.

COMPARISONS WITH OTHER DRUGS.

At the risk of wearying you I wish to repeat some comparisons with other drugs.

Its ferei is not the sthenic form, with hard, wiry pulse and anxiety of *aconite*, but the asthenic variety, with much prostration, full and soft pulse and drowsy though often intolerant mental condition. Here its indications remind us of those for *gelsemium*, but this latter remedy has great muscular weakness or even a paralytic condition and more vertigo, with consequent disinclination to do anything.

In rheumatism remember its close resemblance to arnica and that it is even better for cases characterized by great soreness with which we are wont to associate arnica. Remember also its superiority to *ferrum* in rheumatism for the drawing, tearing pains in right shoulder and down the right arm.

Ferrum phosphoricum seems to be especially suitable to many conditions found in old people when fatty degeneration of various tissues is taking place as is *phosphorous*. Its effects upon the circulation as given above also closely resemble its other element, *ferrum*. *Hamamelis* ought also to be studied in this connection.

Doubtless future provings will reveal to us much more of this valuable remedy; yet already enough has been given to show its

individuality and to enable us to successfully prescribe it upon strictly Homœopathic principles in a larger range of diseased conditions. As scientific prescribers let us frown down its empirical use, too often found among so-called Homœopathists and let us study more closely this valuable drug that we may work out even finer shades of symptoms, thus enlarging its usefulness tohumanity. B. W. SHERWOOD, A. M., M. D.

PASSIFLORA IN THE LIQUOR AND MORPHINE HABIT.

EDITOR OF HOMŒOPATHIC RECORDER.

I take pleasure in complying with the request contained in your favor of the 16th inst., but for the present shall content myself by citing the one and principal case in which I used Passiflora Incarnata so successfully.

Mr. D—, æt. 52, sent for me to attend him during the month of May. I found him presenting all the prodromal symptoms of delirium tremens, and at once ordered him to bed and none too soon, as the event proved. For seven days he tossed about in a wild delirium, which was greatly aggravated by marked gastric irritation. I had him carefully watched, both day and night, until the delirium wore off. The treatment up to this time was Cannibas Ind. for the mental trouble and Nux v., which greatly relieved the gastric symptoms. But the moment he began to improve the old cravings for liquor and morphine returned. Right here let me say, that for years he has been a great sufferer from piles, and the only rest he could get was to sit propped up in his chair. His sufferings caused him to seek relief during the day in liquor and at nights in morphine. And this habit had so fastened itself upon him that try as he might he could not give it up. When he came under my treatment I at once put a stop to all stimulents and narcotics, but not without considerable trouble, for he seemed determined to have them. Night after night he would lie there calling for something to make him sleep, and this kept up until he was bordering on a state of insanity. Fully realizing that something must be done, and that quickly, too, I made up my mind to try Passiflora. This I did, and from the time I gave him the first dose improvement set in and has continued ever since. I at first gave him a half teaspoonful of the Φ at bed time, but this not proving sufficient I increased it to a teaspoonful. He has now been taking it almost constantly

for a period of eight weeks and claims he has not had as natural a sleep for years; and lays particular stress on the fact that when he awakes in the morning he feels so refreshed and his mind remains so clear. But what seems even more wonderful is that from the day he first took this drug up to the present he has never felt the slightest desire to return to his former habits. The mere mention of liquor or opium seems to sicken him, and I am fully satisfied that he is now cured and will (so far as liquor and opium are concerned,) remain so. He now takes special delight in praising the drug to his friends, and really seems never to tire talking about the wonderful help it has been to him. I have also prescribed the drug to others for insomnia and always with success, one case excepted, in which I gave it for hemicrania and here, although it quieted the patient, it failed to produce the desired sleep. This inclines me to think that we get a better action from it when we have great bodily exhaustion. I am also led to believe that it has a more decided action on the male sex. I now purpose to try it on myself and whatever proving I may get will forward to you.

With many thanks for your kindness I enclose you these few lines and trust they may find their way into the columns of your valuable journal.

Very respectfully yours,

D. C. BUELL DUNLEVY.

Port Chester, N. Y., Sep. 20, 1890.

FALLACIES IN MEDICINE.

Dr. J. S. Cain, President of the Nashville Academy of Medicine, in his annual address at the last meeting of that body, spoke on the subject of "Fallacies in Medicine." Homœopathy came in for the following:

"To this class also belongs the exclusive pathy monger, who with his little bundle of infinitesimals and high potencies, and his constricted theories and narrow conceptions, weaves a woof of sophistry and fallacy about his chrysalis form, where without the faculty or merits of further evolution, in his narrow limits and with his meager stock and restricted ideas, he attracts the credulous and unwary, as do his co-workers in other departments of quackery and humbuggery. He fails to find a congenial field for labor and practice in honorable medicine, whose empire is as broad as the universe, and whose explorers draw

from the entire organic and inorganic kingdoms their treasures, and extract from them all that promises relief to suffering humanity, and which does not exact from its votaries any obedience to theory or dosage further than to employ the remedies with which nature has so bountifully surrounded us in an open, dignified and honorable manner. Rather, he fences himself apart with a ridiculous theory and an assumed importance, declaring that he is of a new school and improved system, all the while employing upon his misguided and deluded victims the same remedies and dosage employed by the regular profession so far as his limited stock of medical knowledge will enable him. I will with these allusions dismiss this class. They are with us and often humilating amongst us, but not of us. Their sphere is with the ever credulous public, upon which they feed and fatten, and often flourish like a green bay tree."

The reader, who does not let his feelings run away with his head, will notice two things in the foregoing; first that the speaker seems to be putting a strong control on himself to keep from breaking out in a passion, and, second, that he does not advance a single reason which justifies him in classing Homœopathy among the medical fallacies. Probably Dr. Cain knows nothing whatever about Homœopathy, but, obsessed by that unscientific spirit which arises in the minds of thousands of otherwise very estimable gentlemen whenever *Similia* is mentioned condemns it without ever having read a line of its deep science —a science before which all the modern discoveries in medicine pale into insignificance.

While Dr. Cain confines himself to mere denunciation in alluding to Homœopathy, and fails to show wherein it ever harmed a single human being—for a fallacy in medicine must be harmful—he is at no loss for material when he comes into the domain occupied by those entitled, according to his ideas, to bear the title "physician." One fallacy he treats as follows:

"To the blind following of fashion, precept and theory, and the unquestioned acceptance of master minds, do we find the first cause of complaint. Many of us perhaps recollect and may have participated in the decline and latter days of the grandest fallacy which ever took hold upon the medical mind. I allude to the practice of blood letting in nearly all diseases, which prevailed as a universal practice for many ages, in all countries, where medicine was studied, and practiced as a science. We read in all the works on practice of the times, the advice to place the patient in a sitting posture and bleed to syncope, and as soon as recovered set up and repeat the bleeding, and this too in dis-

eases where such practice as the present time would be considered little less than murderous." Even its worst opponents never charged Homœopathy with murder as Dr. Cain in the foregoing quotation charges almost his entire medical ancestry.

Here is another sweeping condemnation of ancestors and, indeed, of contemporaries: "The reckless and almost universal practice indulged in for ages, and emphasized with renewed life and vigor by Dr. Cook, of administering calomel in enormous and ptyalizing quantities, in its day was a fearful and fatal fallacy, which the non-professional saw and appreciated, before the trend of public sentiment had dawned upon the blind example following professional mind; and there was reared upon the ruins of this fallacy the abortive and half made up spawn of Thompsonism, afterwards rehashed into Eclecticism."

"Hobbies" are next taken up as "fallacies" and these seem to include everything from A to Izzard, so that without meaning it Dr. Cain pronounces the regular profession to be nothing but fallacy, and sums it all up in the following words: "The mighty sea of professional opinions has been stirred to its profoundest depths, and no one has felt sure of his footing upon old professional ground. Those who at first took shelter upon the islands and accumulated debris of former times have been submerged and borne off seaward by the tide, and, if not wholly flooded or picked up by the fleet of new ideas, cling to the wrecks of former theories. A few yet stand upon the continents of former opinion and cry to the troubled waters to be quiet; but they still lash and fret, and will not down at their bidding."

And this is the condition of the medical world to-day, outside of the rational bounds of Homœopathy. A flood has swept over them, carrying wreck and ruin, and its waters are still rising. There is no dry land for the soles of their feet and their only refuge is on one of the "fleet of new ideas." A fleet that is being whirled along on the crest of the flood—whither? God only knows. Their old positions are admitted to be "fallacies," their new chaos.

THE DUST HEAP.

A Man was once assailed by a strong Stomach-ache which siezed him amidship and ever and anon gave him the grip in any thing but a fraternal manner. The Man went to his cupboard and drank Jamaica Ginger, but it fraternized with the

Stomach-ache merrily and things rapidly grew more liquid. Then several ounces of Whiskey were sent after the Ginger and for a time all went giddy but the Man grew thinner and more wretched. Finally he said, after the manner of men: "I have done all I can to cure the Stomach-ache and now I will let Medical Science take the case." He reflected a moment and concluded to "try" the LIVING PRINCIPLE. While journeying slowly and painfully, being forced to stop frequently, he was hailed by a stern, authoritative voice and looking in the direction whence it came he saw a very imposing Dust Heap. "Who are you?" he asked.

"I am the experience of two thousand years. At a glance I see you are suffering from," and it gave it a Long Latin Name.

"Great Cæsar!" howled the Man. "I thought I had the belly-ache!"

"*Stomachalgia*, Eh?" replied the Heap, "That shows how fortunate you were to come to me."

"But—but," replied the Man, "I thought of trying the LIVING PRINCIPLE."

"The 'living principle'!" replied the Heap in a tone of lower-case scorn. "Why that always foolish, and in dangerous sickness, criminal, principle lies buried in Me, buried hundreds of years ago."

The Man dubiously scratched his head and replied "Is that be so? How much you must know!"

"Precisely," was the reply. "The rubbish of two thousand years! When a thing is found to be bad it is cast on Me. It goes to make up Experience. The longest lifetime is not enough to comprehend my composition."

"I think I'll try the—" began the Man backing away.

"No you wont," replied the Dust Heap derisively. "The new medical Law has put the entire matter in my control and from my wealth of Experience I can stump the brightest practitioner of the 'living principle.' The 'living principle' no longer has a foot-hold on this corner lot."

"Then what am I to do!" exclaimed the Man doubling up with pain.

"Oh, I never am without 'new treatments' with which I experiment on the sick before adding them to myself," replied the Heap, jocularly. "Take some——." The very latest. Recommended by Bumblekopfer, for cases like yours."

Then the Man aided in the advance of medical knowledge, and the Dust Heap was a little higher when he was gathered to his fathers. He died in the regular way. * * *

CORRESPONDENCE.

"THE RED LINE ALONG THE GUMS."

In THE HOMŒOPATHIC RECORDER for September there appears an article by A. P. Gardiner, M.D., nnder the caption "Another View of the Red Line." The article calls attention to statements made in my paper, presented to the Homœopathic Medical Society of the State of Pennsylvania, on "The Value and Significance of the Red Line Along the Gums as a Diagnostic Sign of Phthisis Pulmonalis," and apparently questions the explanation given there of the origin and pathology of the red line.

I am sure if Dr. Gardiner and myself had the opportunity of a brief personal interview there would be really no issue between us. My paper was written with only one specific intent, and that was to disestablish the red line along the gums as a diagnostic sign of phthisis pulmonalis. The question of the pathology of the red line was an after and secondary consideration. This point is borne out by a quotation from my article:

"While I felt it was less important to establish the pathology of the red line than to disestablish it as a diagnostic sign, I have tried to discover its exact significance. The line was so generally noted among dispensary patients that I believed it due to one of three causes, or all combined:

"1. To improper care of the teeth.

"2. To an idiosyncratic tendency to the excessive accumulation of dental *débris*, either in the form of tartar, or the deposit of salts from the saliva.

"3. To great general or local connective tissue relaxation and want of tone, permitting the gums to recede from the teeth and a deposition of *débris* to occur."

I am sure Dr. Gardiner will give me credit for the possession of the knowledge concerning the action of mercury upon the gums. I have specifically stated "that, aside from mercurialization, lead poisoning and scurvy, a changed gum line, in the present state of our knowledge, is not diagnostic of phthisis, nor of any other named systemic disease; that as a disease of the gums, the red line may be a local disease from neglect of the teeth, which may find a predisposition in general connective-tissue relaxation; that the red line along the gums can probably be found in any disease giving rise to sufficient debility to cause a loss of

general tissue tone, long enough sustained to allow of a deposition of dental *debris* between the gum edges and the teeth."

I certainly thought of mercury as a possible cause for many of the red lines I saw, but it was the impossibility of establishing with absolute certainty a history of the taking of mercury in these cases that led me to abandon the attempt to prove what proportion of the lines noted were due to the action of mercury, and to assume the broader ground that connective-tissue relaxation, brought about by mercury or any other cause, was sufficient to produce the red line, and also to devote so much space to a description of the *mechanism* of the production of the permanent red line, rather than to attempt an exposition of its possible multiple deeper causes. I could not assert with positiveness, whether I believed or not that many of the lines were caused by mercury, that *all* were so caused; because, had I done so, I would have been placing myself in exactly the same position as the observer who first announced that the red line was diagnostic of phthisis pulmonalis—an assertion based on insufficient and incorrect observation. My fellow-physician, Dr. Gardiner, will also place himself in exactly the same position as the original observer of the red line, if he positively asserts that the red line is always caused by mercury, with this difference, however, that in the very nature of things (if he makes the assertion) it would be nearly impossible to disprove Dr. Gardiner's assertion, and I feel sure the latter gentleman does not place opinion and assertion in a position of greater importance than fact. It has been possible to disprove the value of the red line as a diagnostic sign; it would be next to impossible to prove that all red lines are or are not due to the local and systemic influence of mercury.

I, as has Dr. Gardiner, have noted the effects of mercury on the gums, and I, also with Dr. Gardiner, think of the possibility of mercurialization when I see the red line; but my observation leads me to believe that many factors besides mercury are capable of causing the red line. I, too, have seen the red line before the deposition of debris: "The line appeared in all degrees of intensity, from a slight, distinctly-outlined pinkish blush to a broad blood-red band," and I have, indeed, written poorly if I have so expressed myself that a direct inference can be drawn from a perusal of my entire article that there are no red lines without tartar. I have seen an ephemeral red line in the mouths of children after eating fruit; I have noted a line, not so ephemeral, but without dental debris, in other cases. While it was possible many cases observed by me had taken mercury,

the impossibility of establishing that fact, save in a few rare instances, certainly did not warrant me (although fully aware of the action of mercury) in positively asserting that, simply because I observed the red line, the patients must have taken mercury, and, therefore, I took the broader ground indicated in the several causes given above and placed mercury, beyond mentioning it once, among the factors capable of producing connective tissue relaxation and consequently the red line.

If Dr. Gardiner takes issue with me because I have not given sufficient prominence to mercury among the causative factors in the production of the red line, I will simply say that the influence of mercury as a possible producing cause seemed so generally known, so manifestly apparent, that beyond the definite mention of mercurialization once, I did not deem it necessary to go further. Perhaps I was wrong in this. I regard Dr. Gardiner's article as of value in calling emphatic attention to the necessity of thinking strongly of the possibility of mercurialization whenever the red line is seen—a phase of the subject that was out of the scope and intention of my article. I am glad, therefore, that Dr. Gardiner's article has appeared in THE RECORDER.

EDWARD R. SNADER, M. D.

Philadelphia, Pa.

SELECTIONS AND TRANSLATIONS.

PEROXIDE OF HYDROGEN.

(The following, concerning this useful agent, is taken from a paper by the chemist Bèné.)

Peroxide of Hydrogen is an absolute necessity in the practice of every physician on account of its wonder working powers, its advantages over other disinfectants and antiseptics are: its easy application, quick action, and freedom from danger of absorption. Surgeons cannot do without it; better results are obtained from it by them than with any other specific. It is especially intended for treatment of all classes of wounds, in which it supersedes the most favorite methods now practised; it works like a charm and is a quick success in every case; it will remove the discoloration of bruises, hence, it will be found very useful in cases of accidental injuries about the face or eyes. Peroxide of Hydrogen had a very limited range as a therapeutical agent at first, its application was almost confined to surgical operations

only while at present it is employed greatly as an internal remedy. It is the physician's stronghold against microbes of all description. For genito urinary ailments, especially the reproductive organs of the female, Peroxide of Hydrogen has no equal as an efficient remedial agent. When taken internally, for debility and nervousness, it is rejuvenating, strengthening and tonic. Oxygen is absolutely important and invaluable in cases of emergencies to which the daily practitioner is often urgently and hastily summoned to administer, and to restore the dying or apparently dead, as in asphyxia, poisoning, fainting from almost any cause, from loss of blood in profuse hemorrhages, etc.

It is applied as a dressing, on absorbent cotton, to sloughing, ulcerated and gangrenous surfaces, and will rapidly stimulate granulation; it is the most powerful and antiputrid topical application known, and will terminate the process of pus-formation. Its uses are manifold. Dentists use it in the treatment of alveolar abscesses, it is in fact their main reliance. (See lecture of Geo. A. Maxfield, D. D. S., of Holyoke, Mass., published in July number, 1887, of the *Independent Practitioner*). In necrosis, or caries, PEROXIDE OF HYDROGEN is forced into the cavities, where it acts as no other agent can act; it will do the same in pulpless teeth. Diluted in water (ten drops to tablespoonful of distilled water) and taken every two hours, it will correct the offensive condition of the breath; while as a tooth-wash it has no superior.

Cases have occurred where foul and indolent ulcers were treated with iodoform, carbolic acid; etc., and have poisoned the patient by absorption; with PEROXIDE OF HYDROGEN that is impossible. It is excellent for use in diseases of the middle ear, and will dissolve all pus cell-formation.

There is a wide range for its usefulness in therapeutics and for experiments therein in the future; while to-day, it is no doubt, the *ideal* antiseptic in diphtheria.

Physicians may apply this remedy with perfect safety, provided they use the pure article only, as there is no danger to the patient, even if used in quantity, it is positively *harmless*.

The following are the opinions of well-known physicians who have used PEROXIDE OF HYDROGEN in their practice, their views and opinions are correct in every instance, and should be digested very carefully by the readers of this pamphlet.

Extract of a lecture "On the Medicinal Uses of Hydrogen Peroxide, by E. R. SQUIBB, M. D., Brooklyn, read before the Kings County Medical Association, February 5, 1889, and published in *Gaillard's Medical Journal*, March, 1889.

"Throughout the discussion upon diphtheria very little has been said of the use of the PEROXIDE OF HYDROGEN, or hydrogen dioxide, yet it is perhaps the most powerful of all disinfectants and antiseptics, acting both chemically and mechanically upon all excretions and secretions, so as to thoroughly change their character and reactions instantly, the few physicians who have used it in such diseases as diphtheria, scarlatina, small pox, and upon all diseased surfaces, whether of skin or mucous membrane, have uniformly spoken well of it so far as this writer knows, and perhaps the reason why it is not more extensively used is that it is so little known and its nature and action so little understood. Until within the last few years (except in a few manufacturing processes) it was chiefly known as a chemical curiosity, rarely seen because difficnlt to make." * * *

THE APPLICATION OF MEDICINAL PEROXIDE OF HYDROGEN.
(15 Volumes.)

RECIPES.

For *Sore Throat, Quincy, Tonsilitis* and all *Diseases* of the *Throat.*

1 teaspoonful of Peroxide of Hydrogen with 6 to 8 tablespoonfuls distilled water.

Spray or gargle the throat copiously and frequently with this solution.

For *Scarlatina* and *Diphtheria.*

3 ounces of Peroxide of Hydrogen (15 volumes). 1 pint of pure water.

Use frequently as a gargle or spray and apply in the early stages of the maladies.

For *Vaginal* injections as in *Cancer, etc.*

Use a one-volume solution, thoroughly washing with the same; it may be necessary to increase the strength until the desired effect is produced.

A five-volume solution can also be used, by topical application with a fine camel's hair brush, and sprays.

For *Diphtheria.*

1 tablespoonful of Peroxide of Hydrogen. 8 tablespoonfuls of water.

Spray the nose, throat, mouth, pharynx and larynx copiously and frequently (at least every two hours). When diphtheria is well developed use only one half the above quantity of water, the child may swallow the remedy without discomfort or danger.

For the *Nose, Throat* and *Chest* Diseases.

1 tablespoonful of Peroxide of Hydrogen. 4 to 10 tablespoonfuls of water.

Spray the nose and throat copiously and frequently with an atomizer made of glass and hard rubber.

For *Hay Fever, Rose Cold, Coryza.*

FIRST—Spray the nostrils and throat copiously and frequently with one tablespoouful of Peroxide of Hydrogen. 3 to 8 tablespoonfuls of water. SECOND—Half Peroxide of Hydrogen. Half chemical pure Glycerine.

Ozonized vapors, made from this mixture by means of an atomizer, should be inhaled.

For *Asthma.*

Use same as above, ozonized vapors, and in cases of long standing use also, internally, two or three tumblers full per day of ozonized water made of 1 ounce Peroxide of Hydrogen. 2 pints water.

For *Bronchitis.*

Use same as for Asthma.

For *Laryngitis.*

1 tablespoonful of Peroxide of Hydrogen. 2 to 6 tablespoonfuls of water.

Spray or gargle 3 or 4 times a day.

For *Pharyngitis.*

1 tablespoonful of Peroxide of Hydrogen. 3 to 7 tablespoonfuls of water.

Spray or irrigate copiously 3 to 4 times a day.

For *Gonorrhœa.*

1 tablespoonful of Peroxide of Hydrogen. 3 tablespoonfuls of water.

Give 5 or 6 injections daily. Internally use 10 to 15 grains soda bi-carb. every three hours, to keep the urine alkaline. Avoid walking as far as possible, avoid also beer, coffee, pepper, etc.; keep the bowels regular.

For *Whooping Cough.*

1 tablespoonful of Peroxide of Hydrogen. 4 to 6 tablespoonfuls of water.

Spray frequently and copiously, use also a mixture of half Peroxide of Hydrogen. Half chemical pure Glycerine.

Mix well and administer by means of a hand atomizer, in the shape of ozonized spray or vapor, which must be inhaled; renew this mixture every three days at least.

For *Catarrh of the Nose.*

1 tablespoonful of Peroxide of Hydrogen. 6 to 10 tablespoonfuls of water.

In cases of very great sensitiveness, use even a larger proportion of water. Spray the nose and throat copiously and frequently.

For *Consumption.*

2 tablespoonfuls of Peroxide of Hydrogen. 1 tablespoonful of C. P. Glycerine.

Mix the ingredients well, and give inhalations, lasting 10 minutes at a time, of ozonized vapor, through nose and mouth, produced by an atomizer, deep inhalations will reach the lungs and will relieve the patient and if taken in time will effect a permanent cure. Renew mixture every three days.

For *Croup.*

Same as for Whooping Cough.

For *Women's Weaknesses, Whites, Leucorrhœa, etc.*

1 to 3 ounces Peroxide of Hydrogen. 1 pint of tepid water.

Use copious injections, by means of hard rubber or glass syringes, two or three times a day, and apply.

For *Abscesses, Carbuncles* and all *Sores, etc.*

Apply medicinal pure Peroxide of Hydrogen, 15 volumes, with a glass dropper, and be careful not to remove the white foam which is generated when it comes in contact with the diseased surfaces; soak some surgical lint with it, pure or diluted.

NOTICE—Be careful to have your atomizer and spray tubes kept clean, and pass it through tepid water twice or three times a week, when in use. The improved apparatus can be purchased of almost any respectable druggist.

The vaporizer consists of the attachment of a glass bulb, to the discharging tip of the atomizer and can be procured from most dealers in druggists' sundries.

A Sea Atmosphere for the Sick Room.

The solution to be used and diffused as spray consists of a solution of Peroxide of Hydrogen (15 volumes), containing 1 per cent. of ozonic ether, iodine to saturation, and 2.50 per cent. of sea salt. The solution, placed in a hand spray diffuser, can be distributed in the finest spray in the sick room, at the rate of two fluid ounces in a quarter of an hour. It communicates a pleasant sea odor, and is the best purifier of the air of the sick room, it is a powerful disinfectant also. A large spray producer has recently been invented, which will diffuse the artificial sea air through a hospital ward.

THE "BLACK DEATH."

Boccaccio, it is said, gives the best account of the famous "black death," which during the years 1348–9 swept away, as has been estimated, twenty-five million people. "Here it began," he says, in an Italian city, "with young children, male and female, either under the arm-pits or in the groin, by certain swellings, in some to the bigness of an apple, in others like an egg, and so in divers greater or lesser, which in their vulgar language they termed to be a botch or boil. In very short time after those two infected parts were grown mortiferous, and would disperse abroad indifferently to all parts of the body; whereupon it was the quality of the disease to show itself by black or blue spot, which would appear on the arms of many, others on their thighs, and every part else of the body—in some, great and few; in others small and thick." The boils and following black spots were regarded as sure signs of death and "few were healed, but well-near all died within three days after the said signs were seen, some sooner, and others later—commonly without either fever or any other accident."

The disease was terribly contageous and "the quality of this contagious pestilence was not only of such efficacy in taking and

catching it one of another, either men or women, but it extended further, even in the apparent view of many, that the clothes, or anything else wherein one had died of that disease, being touched or lain on by any beast, far from the kind or quality of man, they did not only contaminate and infect the said beast, were it dog, cat, or any other, but also it died very soon after." He says that one day he saw two swine rooting among some rags in the street, that had been torn off from one who died of the plague, and soon after "each turning twice or thrice about they both fell down dead on the said clothes." One peculiar difference between the plague in Italy and the "east countries," where it originated, was that in the latter "manifest signs of death followed thereon by bleeding at the nose." The "black death," originating in the east countries, crawling along the Mediterranean, up through Europe, reached Sweden and Norway in 1349, thence up toward the frigid zone, finally passed away in Northern Russia in 1351.

CACTUS GRANDIFLORUS.

Dr. Engstad, of Grand Forks, N. D., contributes a paper to an old school journal, confirmatory of the merits of *Cactus Grandiflorus* as a heart remedy and, it is but right to add, states that "Homœopathic literature is very rich in provings and experience" with the remedy. The following are the cases related by him:

"I have in mind a case of a young law student, who complained of palpitation of the heart while walking or exercising in the gymnasium. His pulse would intermit every third beat while standing. If sitting, the heart would lose every fourth beat. If recumbent in bed he would not be troubled by any sense of suffocation as he was while standing, and the heart would be very regular. I gave him 15-drop doses, three times a day. The functional disturbance was soon relieved. After discontinuing the use of the medicine for some time he suffered a relapse, which was again speedily relieved by the use of the cactus. No organic lesion was present.

"I now recall a case of effusion in the pericardial sac. All known remedies had been tried except cactus. After using it for some time he recovered completely, as he thought. But a 'conquering hero,' in the form of a traveling doctor, informed him that he never had any heart disease, and that heavy work was what he needed. He had been advised to the contrary by myself and other physicians. He worked one week, and then I

was called. Enormous dilatation, respiration labored, expression pale and anxious; pulse weak, 32 per minute, but quite regular. I gave cactus for the heart, together with other treatment. Compensation has now taken place, and he expresses himself as feeling as strong as before the organic defect was first noted.

"Recently I had a lingering case of typhoid pneumonia in a lady of 35. Her heart became feeble after the second week. Digitalis and strychnine were tried without any benefit. Cactus stimulated it immediately. She made a good recovery.

"In convalescence from typhoid fever it is excellent in cases where the heart shows symptoms of failing. Some time ago I had a case where the patient was so weak and his heart so overtasked that a feeling of syncope appeared if the head was raised from the pillow. Cactus was given with benefit. Its special field is in functional disorders, as in angina pectoris, where it is almost a specific. I have never been disappointed in its results. I may probably in the future meet with cases that will not be amenable by treatment, but thus far angina pectoris has been easy to relieve by the use of the remedy."

The remedy was always given in appreciable doses—from 8 to 15 drops.

VETERINARY DEPARTMENT.

HEAVES IN HORSES—SILPHIUM.

EDITOR HOMŒOPATHIC RECORDER:

In your September number you mention this disease and recommend several remedies. When collecting material for my volume on New Remedies I was then practicing in a country village. When purchasing hay for my horses I was always recommended to buy that containing "Rosin-Weed," because "horses that ate it would not get the heaves." I, therefore, made extensive inquiries and satisfied myself that there was a basis of fact in such recommendation. Having a valuable horse afflicted with that disorder I ordered my stableman to fish out the leaves of that plant and give it solely to the horse. The effect was very decided. In a week the horse breathed naturally and was rid of his cough. (He had no other food except oats.) Horses are very fond of it and will select the leaves from their usual ration of hay. Clover, it is well known, will cause or aggravate heaves, unless it is well cured. If it is dusty or musty it is sure to cause "heaves" in healthy horses.

Looking upon heaves as a kind of laryngeal asthma I prepared a tincture of *Silphium*, and found it very useful, especially so in the asthma of Millar in children. It is also useful for asthmatic cough and closely resembles in its action Turpene, Terebene, and Lobelia.

E. M. HALE, M. D.

65 E. 22d St., Chicago, Ill.

HOMŒOPATHIC TREATMENT OF ANIMALS AND THE RESULTS OF THE SAME.

The knowledge of the differential symptoms produced by drugs—animal, vegetable, or mineral—is essentially necessary, in the treatment of disease. Not the numerous kinds of medicines will make the practitioner successful, but the study of each drug to the end, that we see at a glance on approaching the sick, *those are the symptoms of that and that drug*. To obtain this requisite knowledge in treating animals I would advise the study of *The Homœopathic Veterinary Practice*, from which valuable book the veterinarian can gain all the information necessary in actual practice. The variety of country practice has enabled me to make many observations among horses, cattle, sheep, pigs, dogs, poultry, young, middle-aged, and old, and extreme old age of the action of low and high potencies.

To illustrate a case of high and low potencies, and their action on one and the same disease and animal, the following may be interesting: Mr. Th. Waterman called on me to examine a three-year-old colt he had bought the day before at a very low figure. After examining the animal and interviewing its former owner I learned the following particulars: The colt had been sick for the last four months; had been treated by an allopath veterinarian with internal and external remedies, but no effect. Diagnosis: Eczema rubrum. General and local symptoms were manifested. The parts locally affected felt hot, somewhat tender and a little swollen; over areas the hair was removed and the skin excoriated, with discharge of ichorous, blood-stained fluid. This discharge from these patches irritated the parts unaffected. Evacuations loose and sour smelling; hair looking rough; eyes sunken and dull, the surrounding œdematous. The colt was extremely restless at times, then again quite the reverse.

Treatment: First day, *Aconite nap.*, 1; six drops every hour. Second day, fever reduced; *Arsenic* and *Aconite*, 1 dec.; six drops every two hours in alternation. Third day, symptoms the same

as second day. Stopped *Aconite* and administered only *Arsenic*. Fourth day, appetite better; also the eyes. Continued the *Arsenic*. Fifth day, appetite still better, but the eczematous swellings aggravated. Continued *Arsenic*. Sixth day, appetite good; the swellings and restlessness more marked than ever. No medicine. Seventh day, somewhat easier. *Arsenic* 30, four times a day. Eighth day, improving; kept on with *Arsenic* 30. Ninth day, quite easy; kept on with *Arsenic* 30. Tenth day, still better. No medicine. Eleventh day, keeps on improving. No medicine. Twelfth day, improving; the patches commence to get dry. *Arsenic* 200, morning and evening. Thirteenth day, the colt remarkably better; no more itching; patches drying up; ravenous appetite. Left a few more powders of the 200, and discharged the colt. Six months after treatment I saw the colt again and he surely is one of the most promising animals I ever saw.

CASE No. 2.—*Epileptic Fits*,—Black mare, 16 hands high, about 1,200 weight, 7 years old, and owned by a farmer who had raised her.

History of the owner: "Night before last the mare got sick. We thought it was colic, and I went to the drug store, bought a big bottle of colic mixture and gave it to her, but it did her no good." I then made an examination of the animal. Pulse and temperature normal; bodily heat normal; in fact all normal except the appearance indicated fright. I told the owner that I would have to wait, and watch, to ascertain how she would act. In about twenty minutes the animal, all of a sudden, evinced signs of restlessness; then in about five seconds she dropped as if shot with a bullet, and had one spasm after another, the muscles became rigid and tense, as in Tetanus, the eyes rolled and had a vacant stare. This lasted about fifteen minutes, when it suddenly ceased, the animal got up and looked about, as if it had had a pleasant dream. This attack occurred at intervals of from thirty minutes to two hours.

Treatment.—In no text-book I ever read of Opium administered in a case like this, only of *Nux vom.*, *Bellad.*, etc., but I could not refrain from employing *Opium* on account of that vacant look and protruding of the eyes; also when she awoke, so naturally as if just got up from sleep. First, second and third day *Opium*, first decimal, 10 drops in water, every two hours. The interval between the fits was from two hours to four, then to six. Finally *Opium* 30., four times a day. The mare improved rapidly and is now as well as if she never had a fit.

OTTO VON LANG, V. S.,

Salem, N. J.

Spongia Knocks the Roup.—In our September issue we gave a letter from Mr. W. M. Rand, now of Franklin, Indiana, and we now present another, in which Mr. Rand says:

"Since you sent me *Spongia* for a roup recipe I have given it a thorough trial, and find it strikes the very vital parts and *does the work.* I have tried a number of recipes, and they all proved a failure, and with the same symptoms, and every condition, the spongia has *cured in every instance*, and for your advice in the matter I am under many obligations. I have quite a good place here and expect to raise a large number of chickens the coming season."

Mr. Rand has been three years trying to get rid of the roup, and has repeatedly asked us to help him. As we have sent him several remedies, with no beneficial results, we were discouraged. Finally we suggested spongia, with the above letter as a reply.

Mr. P. A. Webster, the well-known breeder of Indian Games, of Cazenovia, N. Y., got the roup in his flock, by importing it, and he had quite a job trying to get rid of it. At our request he tried spongia, and here is his reply:

"At the time I commenced using the spongia I had fifteen or twenty cases of roup, and new ones coming down every day. They soon commenced to show signs of improvement, and are *all now entirely well. Spongia did the business.*"

In the face of the above the *Poultry Keeper* believes it has given to the world a remedy that will save thousands of dollars, (though we would not be surprised if some jealous person may not attack it) and we ask others to try it and report to us. Spongia is a Homœopathic remedy.—*Poultry Keeper.*

BOOK NOTICES.

A Clinical Materia Medica. By the late E. A. Farrington, M. D. Edited by Clarence Bartlett, M. D., and revised by S. Lilienthal, M. D. Second Edition. Philadelphia, 1890. 770 pages. Cloth, $6.00. Half morocco, $7.00.

This is one of the most successful books of the day as is evidenced by the fact that an unusually large edition was rapidly exhausted and a new one called for almost before the first one could become well thumbed. As the work was not planned by Dr. Farrington but is builded of the wealth of material left by him in manuscript and reports of his lectures taken down phono-

graphically, it demanded the work of an expert and conscientious editor, and received it at the hands of Dr. Bartlett as all owners of the book will testify. The second edition of the work was under the same competent editor and he says: "In the preparation of this the editor has had, as before, the assistance of the author's manuscript lectures, together with notes of the students whose privilege it was to receive instruction from Dr. Farrington in more recent years than was accorded the editor. The result of this revision has been the addition of a number of symptomatic indications for drugs. These additious have been pretty evenly divided over the whole work. In presenting the second edition of Farrington's *Clinical Materia Medica* to the profession, the editor cannot refrain from expressing his admiration of the thoroughness of the work of its distinguished author. A review of the index shows that more than four hundred drugs were considered by him; many of these received but minor mention, while others he treated of *in extenso*, as their importance warranted. The therapeutic index shows, moreover, that hardly a class of ailments to which humanity is liable but what has received more or less attention." The book is divided into 72 chapters, or lectures, together with an "Index of Remedies" and a "Therapeutic Index"—excellent features—and the whole preceded by an "In Memoriam" by Aug. Korndoerfer, M. D. Farrington's *Clinical Materia Medica* is a book that will materially assist practitioners, young and old, through many a difficult case.

A Clinical Study of Diseases of the Kidneys, including Systematic Chemical Examination of Urine for Clinical Purpose; Systematic Microscopical Examination of Urinary Sediments. Systematic Application of Urinary Analysis to Diagnosis and Prognosis, Treatment. By Clifford Mitchell, A. M., M. D. Chicago. 1890. W. T. Keener. Cloth. 431 pages. $3.00.

Large type, good paper, well printed and easy on the eyes is the first thought on opening this book. It consists of fourteen chapters, an appendix of tables and a thorough index. "The object of my work," says the author, "is to show the practical bearing of thorough examination of the urine on the diagnosis, prognosis and treatment not only of diseases of the kidneys themselves, but of many other disorders." One hundred pages are devoted to Bright's disease, which if it may not be cured may be alleviated and life prolonged by proper treatment and diet. Liberal quotations in this day of many books is out of the question, but here is one we are tempted to make: "*Catheter fever:* In cases of chronic retention of urine death sometimes

results from removal of much urine." Dr. Mitchell has, perhaps, made his book, if anything, too full. For instance, under enuresis: "The omnipresent *Antipyrin* in two doses of 10 or 15 grains, one at 6 and one at 8 o'clock, evenings, is said to cure enuresis in two or three days. Again, under Renal colic, "*Antipyrin* in fifteen grain doses, frequently repeated, is advised by Tyson." These, mixed with Homœopathic treatments, are apt to be confusing and may be pronounced *de trop* by many.

Tuberculosis or Pulmonary Consumption; Its Prophylaxis and Cure by Suralimentation of Liquid Food. By W. H. Burt, M. D. W. T. Keener. Chicago. 1890. 233 pages. Cloth. $2.50.

This book is dedicated "To M. Le Dr. J. P. Jousset, of Paris, France." It claims to be something new under the sun and the author, therefore, had best speak for himself. He says: "Eight months ago, while reading about the wonderful cure of obesity in Prince Bismarck, by taking away all liquids and carbohydrates, and putting him upon a nitrogenous diet, this flashed through my mind: If the taking away of water and the carbohydrates from an obese person will arrest the obesity, will not the giving of an abundance of water, commingled with the carbohydrates, cure all wasting diseases, especially that of tuberculosis? At once I resolved to give this hint a clinical test and the results have supassed my most sanguine expectations, and I now have the great pleasure to announce that the *suralimentation* of liquid food is not only the *greatest* of all *known prophylactics*, but that it will *actually arrest* and *cure tuberculosis*, or pulmonary consumption." These words from the preface give the keynote to the book. Suralimentation, or, in everyday vernacular, over-feeding, "produces rapid gain in weight and strength," says Dr. Burt, and thus cures. "Water, to the amount of six pints, is required daily, to meet the water loss by the kidneys, skin and lungs, to sustain the normal adult body in health; and twice that amount in wasting diseases." The first 135 pages are taken up with ætiology, prophylaxis, diet and drink, and the remainder of the work to the "remedies." The latter part of the book will, perhaps, meet with universal approval, but the first half, being new, must be tried in practice first.

Essentials of the Diseases of Children, arranged in the form of Questions and Answers. William M. Powell, M. D. W. B. Saunders. 1890. Cloth. 222 pages. $1.00.

Essentials of Practice of Medicine, arranged in the form of Questions and Answers. By Henry Morris, M. D., with ap-

pendix on the Examination of Urine by Lawrence Wolf, M. D. W. B. Saunders, 1890. Cloth, 368 pages with appendix of 66 pages, $2.00.

Two more books of the well known "Saunders' Question Compends" by writers of eminence, Dr. Powell being of the staff of the University of Pennsylvania and Dr. Morris, of Jefferson medical college, of Philadelphia, as is also Dr. Wolf. The same words of commendation that were applied to the other works of this series will fit equally well to these two, whose titles are given above. Take, say, "scarlatina." The definitions, or answers to the questions, what is Scarlatina, its cause, symptoms, varieties, sequelæ, etc., etc., will be found very clear and, perhaps altogether accurate, but when the question "How should this disease be treated?" is reached the author goes to pieces—"give quinine in tonic doses," seems to be the only positive instruction as to medication. Other remedies are mentioned almost cynically, or helplessly, as you choose. "Mercuric iodide has been lauded as a specific." "Sodium salicylate has been used every three or four hours." "Ammonium carbonate is good as a cardiac and nervous stimulant, if it does not produce gastric irritability," and so on. Homœopaths must turn from such vague gropings, to their own clear instructions for treatment with peculiar satisfaction.

A Repertory of Convulsions, by E. M. Santee, M. D. New York. 1890. 85 pages. Paper, 35 cents. Cloth, 50 cents.

This little work is published by Dr. Hitchcock. The author says: "I have purposely omitted the lists of remedies said to be indicated by certain pathological names, because I do not believe in such prescribing. If the the totality of the symptoms is covered by a certain remedy it wtll cure no matter whether the name of the malady be catalepsy, eclampsia of epilepsy." He also states that he was induced to prepare this repertory because all other repertories are "almost blank upon this subject." Of the 85 pages half are left blank for notes. Get the cloth binding.

Lilienthal's Homœopathic Therapeutics, third edition, has been before the profession for several months, and many will think, after a casual glance, that there is not much difference between it and the previous edition. But on closer investigation it will be found that the whole work has been most carefully revised and augmented; that the six or more years of close labor by the author has made positively a new work; that three hundred and twenty pages have been added and the whole sedulously brought up to date. A number have said: "Well, I

will take the new edition along and compare it and if it is indeed rewritten I will buy it and give my old one away." Not one of them failed to keep the new work, and no progressive Homœopath can afford to be without it. It is beautifully printed, well bound, contains 1,155 pages, 8vo., and is sold for $7 in cloth, or $8 in half-morocco, less the usual 20 per cent. discount. Postage of either is forty-three cents.

Those who want to go to the bottom of Homœopathic materia medica should get Hahnemann's *Materia Medica Pura*, a grand two volume work, 1,427 pages, half morocco bound, $12.00; or, net, post paid, $11.42. The prefaces to the remedies are of rare value. "Excepting opium I know of no medicine that has been more and oftener misused in diseases and employed to the injury of mankind than chinchona bark." So begins his famous preface to the provings of *China*—but it will not do to begin to quote else one would not know when to stop. This book, with its strong, masterful style, is a good tonic for the weak-kneed and bacteria afflicted. And all the "symptoms" are here, and may their shadow never grow less.

The fourth edition of that fine standard work, *The American Homœopathic Pharmacopœia*, is said to be selling rapidly. It contains 521 pages and gives the preparation of all the leading Homœopathic medicines and of nearly all the obscure ones—if we may so designate the remedies not often used, or about which but little is known. The price of the *Pharmacopœia* is $5.00, net to physicians, post paid, $4.25.

An Explanation of the Phenomena of Immunity and Contagion is the title of a pamphlet reprint, by Dr. J. W. McLaughlin, of Austin, Texas. "How does one attack of an acute disease give man immunity from other attacks of the same malady?" asks Dr. McLaughlin, on page 33, and answers, or begins his answer thus: "A bacterium cell disrupts molecular combinations of the albuminoids when the molecules of each vibrate in the same periods of recurrence; the albuminoid molecules which are thus disrupted or shaken apart, and liberated from their former combinations, will again immediately recombine, because of their attractive affinities to form other combinations, which are called ptomains." This is very lucid, to those who can see it, no doubt.

THE RECORDER acknowledges receipt of "Strictures of the Rectum," by Chas. B. Kelsey, M. D., of the New York Post Graduate School. 46 pages and very tastefully printed.

Homœopathic Recorder.

PUBLISHED BI-MONTHLY BY

BOERICKE & TAFEL,

1011 Arch Street, Philadelphia, Pa.

9 North Queen Street, Lancaster, Pa.

SUBSCRIPTION, $1.00 PER ANNUM.

Address communications, books, etc., for the Editor to E. P. Anshutz, P. O. Box 931, Philadelphia, Pa.

THIS number closes the fifth volume of THE RECORDER, and the fifth year of its existence. It is a pleasure to state here that the year has been decidedly the most prosperous of the five, the subscription list increasing far beyond that of any of the preceding years. This is very gratifying evidence of the approval of the medical profession and it is hoped will be renewed during the ensuing volume; certainly the effort will be made to win it.

SUBSCRIPTION blanks will be put in all the copies of this number of THE RECORDER and in all of the succeeding number, January 15, by the binder. These little slips are at once conveniences and reminders that we shall be happy to send a receipt for Vol VI., 1891.

THE RECORDER'S page of "personals" has become quite a feature. All physicians changing their address or locating in new places are invited to send notice of such change to THE RECORDER. See page iii.

DR. JONES' study of *Baryta*, begun in this number, will be very complete and one of the most notable papers that has appeared for a long time. It alone will be worth the price of a year's subscription ($1.00), to say nothing of papers we hope to secure, and have in hand.

DR. E. F. BRUSH, of Mt. Vernon, New York, does not look with favor on milk-sugar when used in the diet of infants. "He finds," says the *Cleveland Medical Gazette*, "that the powdered milk-sugar of the average drug store sells for considerably less per pound than the market price of the crystals from which the powder purports to be made; and, moreover, that none of the samples of milk-sugar that he purchased from drug stores conformed to the tests laid down in the U. S. P." The complaint carries its own answer. It is not milk-sugar that is at fault, but the medical Cheap Johns. These worthies, and their drummers, "whoop it up" on low prices, or special discounts; poor quality, ignorant workmanship and adulteration are not regarded by them if they can attain their heart's desire, cheapness.

Medicus often thinks he is getting bargains from John when, in reality, he is paying an exorbitant price for the article he buys, like the adulterated milk-sugar of Dr. Brush, which sells, when powdered, for less at retail than the pure crystals can be bought for by the ton, is dear at any price, or even as a gift. Cheap John in medicine often plays hob with the doctors' practice, but the latter cannot quite put all the blame on John's head, when he went after cheap goods and got them.

ATTENTION is directed to the card of the *Homœopathic Envoy* to be found in advertising pages of this number of THE RECORDER. The *Envoy* was started last March without a single subscriber, but the little paper seemed to have the "catching on" quality and they soon began to come in and have continued to do so ever since, so that if the present pace is maintained it will soon have a circulation that would be looked upon with respect even among the non-medicals. The *Envoy* was designed to be a missionary, not an advertising paper, and this design has been very faithfully carried out. The need for this sort of work is apparent to all; tracts and pamphlets do very well but they do not everlastingly keep at it. The *Envoy* does, every month. At the very low rates at which the paper is now offered in quantities it will be easy to flood any particular district either with a view to educating the people, or fighting adverse legislation. The columns of the paper are open to any proper paper, not too long, and thus the physician can address his own public if he cares to. Twelve numbers a year of a readable Homœopathic paper sent to twenty-five, fifty, a hundred, or more, intelligent families in a neighborhood, must inevitably have a good effect. Look into the matter, and get a specimen copy.

A NEAT "announcement," received from San Francisco, California, dated Oct. 1st, reports that Mr. W. E. Runyon has purchased a half interest in the Homœopathic Pharmacy of Boericke & Schreck, and hereafter the firm will be Boericke & Runyon. Mr. Runyon is an experienced chemist and will be a gain to Homœopathic pharmacy.

"SOME months ago a Baltimore wholesale drug house received from a customer in North Carolina, a prominent and reliable merchant, a dram bottle of quinine (so-called), which he had been induced to buy in quantity by a very low figure. The house, being suspicious of the sample, forwarded it in turn to a prominent chemical concern for examination, and it was reported to be cinchonidine, containing no quinine whatever. The Baltimore merchants embodied these facts in a circular, adding that they had been creditably informed that the house selling the so-called quinine was adulterating castor oil, linseed oil, and other goods. This circular was distributed to their trade, and may possibly convince some persons, that in buying drugs, or anything else, for that matter, at a price greatly below the market rate, the purchaser is very apt to be swindled."—*Druggists' Circular and Chemical Gazette.*

THE

Homœopathic Recorder.

BI-MONTHLY.

VOLUME VI.

1891.

PUBLISHED BY

BOERICKE & TAFEL.

BOSTON MEDICAL
JUN 41914
LIBRARY

INDEX TO VOL. VI.

A Discovery, 69.
A Practical Materia Medica, 146.
A Strange Case, 256.
An Episode in Homœopathy, 279.
Aloes, 68.
Alstonia Constricta, 104.
Arboris Persicæ Cortex, 45.
Amaurosis (Sulphur), 268.
Ammonium Mur. (Diarrhœa), 275.
Angina Pectoris (Lat. mac.), 84.
Announcements, 110, 111.
Aphthæ in New-born Children, 271.
Asarum Can., 132.
Antipyrine, 263.
Antipyrine and Death, 142.
Asthma (Blatta or.), 196.
Avena Sativa, 66.

Barium, The Salts of, 1.
Baryta Carb., 183.
Bee Sting Poison, Medicinal Uses of, 209.
Benzoic Acid (Rheumatism), 268.
Bichloride of Gold, 287.
Blatta Orientalis (Asthma), 142, 194.
Bright's Disease (Baryta carb.), 10.

Cactus Grand., 126, 221.
Calcarea carb (gout), 269.
Calendula, 130.
Calendula, Proving, 215.
Cancers, 26.
Cancers (Arsen.), 23, 103.
Cancer (Silicea), 265.
Cancer (Stomach), 24.
Carduus Marianus, 118.
Catarrh (Chel.), 27.
Chills and Fever (Pamb.), 47.
Cholera, A Phase of, 205.
Coca, Erythrorylon, 15, 49.
Collinsonia, Can., 45, 101.
Cough (Eup. per.), 158.
Cystitis (Lycopodium), 155.

Deafness (Mullein Oil), 84.
Diabetes Mel. (Rhus arom.), 129.
Diarrhœa (Am. mur.), 275.
Diarrhœa, Chronic (Nuphar), 268.
Diarrhœa, Chronic (Rhus), 268.
Different Action of Potencies, 59.
Droscorea Vil., 86.
Doctor Samuel Lilienthal, 244.
Drosera Rotundifolia as a Prophylactic in Phthisis Pulmonalis, 153.

Ear-wax, 107.
Eczema Squam. (Ars. iod.), 44.
Elephantiasis Arabum (Graph.), 56.
Epilepsy (Pothos foet.), 59.
Epilepsy (Sol. car.), 68.
Erythroxylon Coca, 15, 49.
Erythroxylon Coca, or Platina, 108.
External Applications in Hom. Practice 77, 81, 113.
Eyes, 23.
Eye Remedy, A Strange, 85.

Feeble Minded Child (Bufo ran.), 21.
Ficus Indica, A Proving of, 156.

Gall-stone Colic, 250.
Ginseng, 220.
Good Medicines, 88.
Gout (Calc. carb.), 269.
Graphites, A Peculiar Effect, 269.
Graphites, A Remarkable Cure by, 271
Graphites (Herpes), 267.
Graphites (Navel), 263.

Hahnemann vs. Committeeman, 54.
Hæmorrhoids, 223.
Hæmorrhoids (Carbo veg.), 267.
Herpes (Graphites), 267.
Hot Water as a Remedial Agent, 179.
Hydrastis Canadensis, External Use of. 212.
Hypermetropia, Congenital, 79.
Hypnotism, A Defense of, 71.

Intestinal Worms, 222.
Inter. Hom. Congress, 28, 73, 77, 144.

Journalistic "Lagniape," the "Reading Notice" Nuisance, 253.

Kali bich. (phlegm), 267.
Kali Phos., 19, 168.
Keystone Hospital, 219.
Keystone Pointers, 103.

Latrodectus Mactans, 84.
Loco Weed, 186.
Lycopodium, in Cystitis, 155.

Marasmus (Iod.), 21.
Masturbation (Coca), 15, 53.
Materia Medica, Rev. of, 27, 61.
Mercury, 87, 181.
Michigan Trans., 164.
Milk, Danger of Unboiled, 128.
Mullein Oil, 83.

NEW PUBLICATIONS.
A Clinical Guide, Jahr, 282.
A Guide to Clinical Examination of Urine, 140.
A Manual of Aus. and Perc., 39.
A Materia Medica Primer, 141, 187, 237.
A Mystery of New Orleans, 40.
A Text-book of M. M. and Pharmacology, 41.
A Treatise on Diseases of the Eye, 136.
Advice to Women, 139.
Bœnninghausen, Pocket Book, 37.
Chemical Lecture Notes, 42.
Clinical Text-book of Medical Diagnosis, 190.
Compendium of Materia Medica Therapeutics and Repertory, 236.
Consumption, New Cure of, 91.

Essentials of Anatomy, 284.
Essentials of Physiology, 284.
Essentials of Practice of Pharmacy, 43.
Essentials of Surgery, 141.
Epitome of Hom. Medicine, 93.
Fourth Rep. S. B. of Health, Pa., 91.
Greater Diseases of the Liver, 238, 283.
Headaches and Their Concomitant Symptoms, 92.
History H. M. S., Ohio, 41.
Homœopathic Bibliography, 93, 141, 188, 238.
Insomnia, 43.
International Homœopathic Annual, 234.
Intestinal Surgery, 40.
Koch's Remedy in Relation Specially to Throat Consumption, 140.
Notes on New Books, 285.
Pocket Medical Lexicon. 43.
Poultry Doctor, The, 38.
Rectal and Anal Surgery, 41.
Rubrical and Reg. Text-book, 39.
Specific Art of Healing, 41.
Sylabus of Obstetrical Lectures, 235.
Transactions A. M. Inst., 1890, 19.
Transactions Maine, 1890, 25.
The Diseases of Personality, 139.
The Year Book of Treatment, 140.
Three Thousand Questions, 284.

Nervous Derangements, 25.
Nervous Prostration (Kali phos.), 20.
Nymphomania (Coca), 50.
Nymphomania (Plat.), 109.

Olive Oil in Gall-stone Colic, 250.
Onosmodium Vir., 108
Orificial Surgery, 168.

Pambotano, 46.
Parafine Proving, 239.
Paralysis (Baryta Carb.), 9.
Pathenium Hysterophorus, 66.
Pathology, 164.
Passiflora inc., 85, 158, 220.
Phlegm (Kali bich.), 267.
Pharmacy of Tincture, 241.
Potency, 177.
Pothos Fœtida, 59.
Pyrogenium, 161.

Rano Bufo, 259.
Ranula and Polypus, 248.
"Red Line," Last Word, 30.
Revision of the Materia Medica, 27, 61.
Rheumatism (Benzoic acid), 268.
Rheumatism (Colinsonia), 103.
Rhus Aromatica, 129.
Rhus tox., 70.
Rhus tox. (Chronic Diarrhœa), 268.

Sabal Serrulata, 82, 183, 239, 259.
Sambucus Nig., 130.
Saw Palmetto, 82, 183, 239, 259.
Scrofula (Baryta carb), 11.
Silicea after Vaccination, 272.
Silicea in Cancer, 265.
Single Remedy in Disease, 273.
Solanum Carolinense, 67, 223.
Solidaga Virga-aurea, 146.
Somnambulism (Bry.), 131.
Southern Association, 230.
Stammering (Agar.), 23.
Staphisagria, 169.
Sticta pul in Measles, 131.
Succus Calendulæ, 263.
Sulphur (Amaurosis), 268.
Symphitum, 127.

Teucrium in Leucorrhœa and Blindness from Opacity (?) of the Cornea, 97.
The Sport of the Cat Is Fatal to Mice, 150.
Thuja, 212, 248.
Thuja Oc, Specific Action of, 270.
Thuja, Hypodermic Use of, 111.
Tinctures, The Pharmacy of, 241.
Tissue Remedies in Diseases of Children, 206.
Tonsillitis (Baryta carb.), 9.
Triturations and Mortars, 240.
Typhlitis Stercoralis Rheumatica, 254.
Typhoid Fever (Pyrogen.), 161.

Ulcer, Stomach (Baryta carb.), 9.
Ulcer, Varicose (Card. mar.), 119.

VETERINARY DEPARTMENT.
Anthrax Fever (Horse), 276.
Azoturia (Mare), 36.
Canary Bird, 277.
Caries of Jaw (Cow), 277.
Cholera (Chicken), 137.
Colic (Horse), 278.
Concussion (Horse), 91.
Diaphragm, Spasm (Horse), 231.
Diarrhœa (Cat), 185.
Fetlock, Hurt (Horse), 128.
Fever, Petechial (Horse), 90.
Fistula (Horse), 134.
Glanders, 136.
Homœpathy in the Stable, 231.
How Vet. K. Became a Homœopath, 137.
Lameness (Dog), 88.
Lameness (Horse), 89, 184, 276.
Leucorrhœa (Mare), 34.
Lockjaw (Horse), 135.
Milk lost (Cow), 90.
Œdem. Erysipelas (Cows), 134.
Pig, Torpor, Lameness, 279.
Prolapsus (Cow), 89.
Rheumatism, Eye (Horse), 185.
Roup, 279.
Sore Eyes (Dog), 278.
Stringhalt, 136, 185.
Sulphur Good in All Forms, 183.
Typhoid (Horse), 232.
Uterus, Inversion (Cow), 35.
Veternary Science and Homœopathy, 232.
Wound, Chest (Dog), 184.
Wound, Chest (Dog), 279.

Vaccinosis, 270.
Vomiting (Arb. Per. cor.), 45.

Washington Letter, 75.
Western Academy, 110.
Whooping Cough, 127.
Wisconsin Meeting, 230.

ON MEDICAL
1914
LIBRARY

THE
HOMŒOPATHIC RECORDER.

VOL. VI. PHILADELPHIA AND LANCASTER, JAN., 1891. NO. 1.

AN OFF-HAND STUDY OF THE SALTS OF BARIUM.

BY SAMUEL A. JONES, M. D.

(Concluded from Vol. V, page 254.)

There is no recorded instance wherein any of these salts have been used for the purpose of suicide, and the reported cases of accidental poisoning are few. These, however, are unequivocal and significant. They teach very evidently that toxic doses do not bring out the finer features of the physiological action of the drug, and they demonstrate, with equal clearness, that the resulting symptoms depend upon the size of the dose. The rule, with the salts of Barium, seems to be paralysis of the voluntary muscles from large doses and clonic spasms from small. Boehm says that in cold-blooded animals the paralysis is preceded by a peculiar state of rudimentary, clonic spasms: this order has not been observed in the human being.

There is, however, one poisoning which is an exception to the seeming rule of dose-quantity. A man swallowed, by accident, seventy or eighty drops of a solution of the chloride of Barium. "He had soon after profuse purging without tormina, then vomiting, and half hour after swallowing the salt excessive muscular debility, amounting to absolute paraplegia of the limbs. This state lasted about twenty-four hours, and then went off gradually." [1.]

"A woman, aged 42, for pains in the stomach, took one morning a solution of half an ounce of chloride of Barium by mistake for sulphate of soda. She was soon seized with nausea, retching, convulsive twitches of the face, hands and feet, vomiting of clear mucus, great anxiety compelling her to cower together, restlessness, and loss of voice; and she died under constant efforts to vomit, and violent convulsive movements, but with her faculties entire." [2]

"A healthy barmaid, aged 22, took a teaspoonful of the chloride of Barium at 12:30 p. m. In half an hour she became

badly sick all over, sharp burning pains in stomach and bowels, vomiting and purging with much straining. Got an emetic. At 2 p. m., was lying on her back, face pale, anxious, eyes deeply sunken, surface of body very cold, heart's action feeble and irregular, pulse hardly perceptible, tongue natural and warm, muscular power of extremities almost gone, sensation unimpaired. All fluids vomited mixed with ropy mucus. Pains in stomach and hypogastrium, lightness of head, singing in ears, twitching of face, and twisting of legs and arms. Was given Epsom salts, heat to extremities, sinapisms to abdomen, &c. At 9 p. m., vomiting and purging gone, color returned to lips, warmth to surface, pulse 60, regular, and pretty strong, still complained of twitching and twisting, and of noise in ears. At 2 a. m., purging returned, all voluntary muscular power annihilated, except that she could speak feebly, and could swallow. Slow and labored respiration with copious effusion into bronchial tubes, loud loose rales all over chest. Perfectly sensible, fell asleep for one hour, breathing all the time becoming slower and more labored, and countenance dusky. Awoke about 3 p. m., muttered something and became convulsed, continued to be agitated by the most frightful paroxysms for two hours, when she died. During fits had several watery movements." [3.]

The next cases show the paralytic form of poisoning. "A man took a strong solution of the acetate of Barium. One hour later he was lying stretched on his back, deprived of all voluntary motion, with pale face, haggard features, drooping eyelids, normal pupils. Skin was covered with profuse clammy sweat, voice faint, and speech unintelligible. Pulse 125–30, very small; heart sounds muffled; respirations incomplete, more frequent than normal; sounds scarcely distinguishable. Tongue was cold, slightly blackened, but still moveable. Complained of nauseating taste. Epigastrium was not sensitive to pressure, nor were colics present; there was, however, belching and inclination to vomit, also involuntary diarrhoea and micturition; urine clear and profuse. The patient died within twelve hours of taking the draught, in full possession of his senses, but with absolute paralysis of all voluntary muscles." [4.]

The physician in the above case, who had made a mistake in the prescription, tested the solution on himself. [A good example!] "In three hours discomfort and general weakness, with lightness of head, set in. In upper extremities and on scalp and skin of face, formication was felt. He was obliged to go to bed, and was immediately attacked with nausea, belchings of wind, and liquid diarrhoea. After three hours more, weakness had

perceptibly increased, and the left arm could no longer be moved, though sensation was intact; temperature and transpiration of skin were normal; pulse about five beats slower than usual. He found it impossible to pull the bell or leave the bed; and eight hours after taking the dose the upper and lower extremities were almost paralyzed. To the previous symptoms was now added copious vomiting, which was repeated several times during the night. Paralysis of muscles still increased, and spread first to abdomen, then to chest and neck, and last to sphincters of bladder and rectum. Coughing, spitting, and even utterance of polysyllables became difficult; respirations were labored, and urine and fæces were evacuated involuntarily. Pulse fell to fifty-six and for a short time became irregular; temperature of skin now seemed lower than usual. A few red spots showed themselves on the thorax, but disappeared after a few days. There was constant thirst, relieved by pieces of ice in the mouth. No pain was felt, but the experimenter, with full consciousness, experienced all the symptoms of impending death." [5.]

"A medical student took three teaspoonfuls of the chloride of Barium, thinking it to be Epsom salts. This at 8:30 a. m. After which he vomited four times and had four stools. At 10 a. m., he was very weak and prostrated, complained of pinching in abdomen, nausea and urging to stool. Pulse soft and regular, tongue clean. In half an hour the upper and lower extremities were icy cold, great weakness, unable to move hands or feet, sensibility intact, incomplete paralysis of left eyelid, speech weak, indistinct, complains of violent cutting and pinching in abdomen, which came on in fits every two minutes, and was attended by loud groaning; abdomen not sensitive to touch. Had vomited three times, stools ceased. He got a lemonade made with sulphuric acid from 11 a. m., onwards. . . . At 5 p. m., the extremities were warm, pulse to 84, 8 p. m., alternate heat and cold of limbs, quicker and slower [sic] pulse, slight sweat, no more vomiting and purging. Night pretty quiet, pains much diminished, no sleep. Morning pretty lively, pains slight, pulse 80, warm, could move arms. No urine passed since yesterday morning, a moderate quantity of clear urine now drawn off with catheter. Next morning he was quite well." [6.]

"A family consisting of parents, daughter, and female friend, partook of some meal which contained 10 per cent. of carbonate of Barium, with a minute quantity of the sulphate; a dog and a canary bird also ate some. The bird died in five minutes! immediately after the dog was taken with violent diarrhœa; and fifteen minutes later the four human beings became sick; one

woman being affected like the dog. The three women drank some milk, vomited immediately, and felt relieved. The father experienced only rumbling in the bowels; did not take milk until later, 10 p. m.; this was followed by vomiting with diarrhœa, and at 4 p. m., on attempting to go to the closet, he fell to the ground with symptoms of collapse. In the morning vomiting and diarrhœa ceased, but gave place to paralysis, extending from below upwards, so that at 10 a. m. he could only nod his head. At 2 p. m., the physician found his face red, speech difficult; loss of voluntary motion in limbs, but sention intact; reflex excitability increased; sphincters normal; respiration rapid, with tracheal rales; sensorium free. Pulse and temperature normal; no pain, even in stomach. At 9 p. m., he died." [7.]

"A young woman swallowed half a teacupful of the powered carbonate of Barium stirred up with water. After two hours she experienced dimness of sight, followed by double vision, ringing in the ears, pain in the head, throbbing in the temples, sense of distension and weight in the epigastrium, and palpitation. A little later came pains in legs and knees, and cramps in calves; vomiting twice; hot dry skin; flushed face; full hard pulse, 80. During the night fifteen motions, little or no sleep. Next day surface still hot, but perspiring profusely; slight pain about pharynx; tongue moist but white furred. After the second day the cramps in the limbs increased, with sense of weight in them, and soreness to touch. Symptoms continued with but little change for a long time, especially pains in the head, left side, and epigastrium; also severe and long-lasting palpitations." [8.]

A patient took an ounce of the chloride of Barium by mistake for Glauber's salt, and "immediately after swallowing it felt a sense of burning in the stomach; vomiting, convulsions, headache, and deafness ensued; and death took place within an hour." [9.]

A ROUGH RESUMÉ.

1. Vomiting in - - -	Case	1	2	3			6	7	8	9
2. Purging - - - -	"	1		3	4	5	6	7	8	
3. Paralysis - - - - -	"	1		3	4	5	6	7		
4. Sensory nerves not affected,	"			3	4	5	6	7		
5. Cardiac disturbance - -	"			3	4	5	6		8	
6. Respiratory disturbance,	"			3	4	5		7		
7. Sensorium unimpaired -	"			3	4	5		7		
8. Lightness of head - -	"			3		5				
9. Surface Temperature lowered	"			3		5				
10. Convulsions - - - -	"			3						
				10	6	8	5	6		

This table has been prepared chiefly for the benefit of those gentlemen who delight in criticising the homœopathic provings, and whose great objection is the lack of correspondence therein. In the above list symptoms 3, 4, 5, 6 and 7 are essentials of a poisoning with a Barium salt, and yet we find them wanting in six out of nine unquestionable cases of poisoning. This is all the answer that such critics require, and it has the double merit of brevity and sufficiency.

The same class of critics also condemn the acceptance of a single symptom occurring in a single prover; according to them it must be corroborated before it can be incorporated in a pathogenesis. One of the above cited cases of poisoning, [5], refutes this most strikingly. It is the only one of these nine poisonings that presents the following symptom: "In the upper extremities and on the scalp and skin of face, formication was felt." According to their ruling this must be discarded because it stands alone in these poisonings; but it corroborates, and is corroborated by symptoms 39, 51, and 161 of the pathogenesis of Baryta acetica as given in the Encyclopædia of Pure Materia Medica.

It is confessedly difficult to appreciate the paralytic symptoms produced by the salts of Barium, and I have not been able to find any therapeutical application thereof. As pathogenetic phenomena they are referable solely to the spinal cord. As sensation is wholly unimpaired, the affected territory can be somewhat definitely located: "The conduction of motor impulses from the brain is in the antero-lateral white columns, perhaps solely in the pryamidal tracts." "The power of voluntary motion may be arrested by a lesion anywhere in these tracts—lateral column of the cord, grey matter, and anterior nerve-roots." Gower. *The Diagnosis of Diseases of the Spinal Cord*, 2d Ed., p. 14.

The pathological nature of the paralytic symptoms is more difficult of determination. From the suddenness of their onset they must be ascribed to changes in the blood-supply of the anterior portion of the spinal cord. This change cannot be of the nature of hæmorrhage because hæmorrhage in the cord is attended with sensory disturbances, and in cases of poisoning with the salts of Barium the paralytic phenomena disappear much sooner than were possible if they depended upon a blood-clot in the substance of the cord.

Speaking of "anaemia of the cord" and "hyperaemia of the cord," Gower says: "I cannot help thinking that a vigorous scientific imagination has contributed much more than observation has supplied. The only practical knowledge of the effects

of anaemia and hyperaemia of the cord, is, that they seem capable of causing such disturbance of the sensory structures as reveals itself in subjective sensations of tingling, pins and needles, and the like, and perhaps also some impairment of motor conduction." Nevertheless, on one or the other of these conditions the paralysis from poisoning by a Barium salt must depend.

We have seen that the Barium salts produce tonic contraction of the arteries and arterioles, thus producing anaemia. We find also that the febrile conditions producible by the Barium salts are occasioned by the smaller doses. Then as the large dose produces contraction of the vessels, and the small dilatation, we infer a profound anaemia of the antero-lateral white columns of the cord as being the pathological condition when motor paralysis is produced by large doses of the Barium salts.

It is difficult to declare positively whether the paralysis produced by the salts of Barium is of the ascending, or of the descending, variety. In case 7, as we have cited them, it is distinctly reported as "extending from below upward," while in case 5 the direction is from above downward. As case 5 is from a poisoning with the acetate, and 7 from the chloride, the difference should be remembered. In the animals poisoned with the chloride the paralysis was invariably of the ascending variety.

So far as the pathology of the spinal cord is known there is no condition analogous to that produced by the salts of Barium, and the therapeutical application of the drug awaits a Columbus to stand the egg on end.

In the second case of poisoning that we have cited the following symptoms occurred: "Convulsive twitches of the face, hands and feet." Dose: half an ounce of chloride of Barium. And in the third case, wherein a teaspoonful of the chloride had been taken, there were observed, "twitching of the face, and twisting of legs and arms."

I have seen similar symptoms follow the taking of exceedingly smaller doses. The chloride of Barium had long been a favorite remedy with me for reducing hypertrophied tonsils, and while giving the third decimal dilution to a girl of 8 for that purpose, the following was the result: the dose being a saturated two-grain tablet every two hours; the drug having been taken three days. While at my supper the father telephoned me to learn what I was giving his girl. On my asking why he made the enquiry, he replied, "it is making her look foolish, and she is acting very strangely." Not expecting anything serious from the 3x, I bade him stop the medicine and bring the girl to my office the next morning.

When the child was brought I found slight twitching of the facial muscles, and decided jerking of the arms and legs; all markedly worse when she was looked at closely. The expression of her face had changed, not that she looked "foolish," but listless.

While at breakfast, the morning of the day that the father telephoned me, the mother had given the child a plate containing some food. This the girl had taken in one hand, when she suddenly flung plate, food and all against the wall. She escaped a whipping by her earnest declarations that she could not help doing as she had done. The mother watched her during the day and found that the "jerkings" got worse. On stopping the drug these untoward symptoms passed off inside of three days. The subject is a marked blonde and very scrofulous; being especially subject to glandular swellings. Her health has been remarkably good since the misadventure with Baryta muriatica.

There is no instance recorded in Homœopathic literature wherein these spasmodic effects of the chloride of Barium have been applied therapeutically, and yet they indicate a remedy for chorea cases that prove intractable to all other remedies, as we hope to show.

It will be well to cite the effects of smaller doses if only to establish the action on the vascular system.

Crawford observed vertigo, prostration, quick pulse, increase of heat, and loss of appetite. A common effect in all his patients was increased urinary exertions. A small quantity in solution taken into the stomach causes a sensation of agreeble heat.

From an over-large dose Hufeland saw nausea, retching, violent vomiting, anxiety, palpitation of the heart, and vertigo. In two cases where there was no vomiting, anxiety that lasted several days. It frequently caused increased urinary exertion, and skin eruptions were often seen. To him it seemed rather to retard the pulse.

Forty drops of a solution of half a drachm of the chloride in in one ounce of water caused great heat of body, and from ninety-five drops the patient was in a dry heat all day, pulse much excited, and head greatly affected.

Doses of from one-fifth of a grain to three grains caused a feeling of warmth in the stomach that rose to the chest and head, slight colic, diarrhœa and increase of cutaneous and urinary excretions. On leaving off medication for twenty-four hours there supervened a febrile condition, thirst increased, tongue and mouth dry, swallowing difficult, anorexia, pulse quick and full, heat increased, face red, weakness. This state generally lasts seven

days, and during this time there sometimes occurs catarrh of the eyes, nose and inflammation of the skin. Inflamed and suppurating glands show increased irritation, pus flows more abundantly, their hardness and swelling diminish, wounds become red and cicatrize.

We give Neumann's observations because they have been accepted by Hahnemann and Hering. "I saw scrofulous children whom I treated with this remedy become anthropophobic, cowardly, forgetful, lose their power of attention when reading, and the desire to play; and I have seen it produce this depressed disposition in wildly excited maniacs." Neumann is also the authority for the efficacy of the chloride of Barium "in every form of mania, as soon as the sexual desire is increased."

Kramer has detected the chloride of Barium in the blood and urine, and Orfila found it in the liver, spleen and kidneys.

THERAPEUTICAL APPLICATIONS.

As Hering says, "very few cases have been published." Baehr pronounces it "one of the most distinguished remedies for paralysis following apoplexy, and for paralysis of old people." In the latter case, he says, "a want of steadiness, a feeling of debility of the whole body, giving way of the knees, and pain in the lumbar portion of the spine precede the paralysis."

A striking case is reported by Dr. W. F. Laurie in the *Homœopathic World*, Vol. IV, p. 261. "Being asked a little while ago if I could suggest any remedy for the mother of a lady patient of mine, whom she represented as being nearly ninety years of age, in a very infirm state, and paralyzed in the right side, I found that she was seized with hemiplegia two years ago whereby she lost the use of that side entirely. The lady (whom, by the bye, I have not seen) had suffered for many years previously from palpitation and disease of the heart; deafness also had been coming on gradually for twenty years, and during that time she had become so deaf that she could not be made to hear anything said to her at all; all had to be written.

"I advised that a quarter-grain dose of Baryta Carbonica, 3rd trit., should be given her twice a week. Some time after my lady patient informed me that her mother took the medicine as recommended, twice a day, once a week, for a month; then stopped ten days; then took it the same way again, and again for another month. She began to improve very much after the first month, and has gone on to improve since.

"Under the above treatment, perseveringly employed, she has at length become able to hear one person who sits by her and

talks slowly and distinctly. Her strength has also improved, so that she can walk three parts of a mile and back some days. The attacks of palpitation are also less frequent and severe."

Hartmann was of opinion that paralysis of the tongue was seldom cured without resort to this remedy. Bayes has "often seen this medicine curative" in facial paralysis.

Its field is the *paralysis* of impaired nutrition, and therefore of decay. It will find application in the aged, and it must be remembered that age is not always a synonym for years: there are the old and the prematurely old. Senility, and premature senility are its prime indications; important factors are concomitant defects of sight, or of hearing. In the anamnesis palpitation of the heart, enlarged glands, especially behind the ears, and on the back of the neck, are significant elements.

I refer to its use in *tonsillitis* only to say that I have had but three failures with it in thirty years. In a farmer who had an attack whenever he took cold, and he was extremely susceptible thereto, it completely removed the tendency to both.

In a case that came to me from old school hands in consequence of the farmer's emphatic recommendation and in which both tonsils were involved, suppuration appearing inevitable, it brought about a prompt resolution without discharge: the most unqualified demonstration of the vis medicatrix that I have ever witnessed. This remedy, in my opinion, is especially efficacious in red-headed and freckle-faced patients; at least, I have seen the most remarkable results in patients wherein that æsthetic combination obtained. Doubtless a compensatory providence; but I prefer the tonsillitis.

In the gastric sphere Baehr says: "Baryta Carbonica presents all the symptoms that characterize ulcer of the stomach," and adds that he had "used it with success, but only in cases where there was no vomiting, or only vomiting of a small quantity of mucus, and where the cardialgic pains did not recur in distinctly separate paroxysms but were rather of a remittent type."

In the second case of poisoning that we have cited "the stomach was found perforated posteriorly, in the lesser curvature near the cardiac orifice." Wildberg, who reported the case, ascribed this to the previous disease and not to the poison. Christison and Taylor are of the same opinion. But Woodman and Tidy, from ten grains of Barium nitrate given to a rabbit, found "the stomach inflamed and rotten," and after five grains given to another rabbit, the stomach was "inflamed and very rotten." In view of these anatomico-pathological facts certain symptoms of the acetate of Barium are significant:

"Painful, writhing sensation in the stomach when the bolus descends into it, as if the bolus had to force its way through sore places."

"The pressive, sore sensation and gnawing in the stomach are most severe when standing and walking, also when sitting bent; when lying on the back, on bending forward, or when pressing on the stomach with the hands, she feels only the painful pressure, not the gnawing."

If the word "gnawing" correctly expresses the prover's sensation, the symptom is entitled to profound consideration, for "gnawing" is the epithet *par excellence* descriptive of gastric ulcer.

Ulcer of the stomach is of more frequent occurrence in women than in men, and it is more apt to arise at the accession of menstruation and at the climaxis. When existing at the accession, it is commonly in company with scanty menstruation, or with amenorrhœa, and the long interval between the periods in the climaxis is an analogous pathological condition. If the stomach symptoms cited are coexistent with the scanty menstruation of the Barium salts the remedy demands earnest consideration.

[Scanty menstruation is the characteristic Barium effect as deducible from the sexual symptoms; depression of the venereal appetite being its salient feature. In women profuse menstruation and strong passion are cœxistent, and vice versa.]

The salts of Barium deserve consideration in Bright's Disease, especially the cirrhotic variety. The following symptoms are certainly suggestive: "The eyes are swollen in the morning. Pale face. Face puffy. Increased urine; she rises twice every night to urine; passes much each time. Palpitation of the heart. General loss of strength."

The increased arterial pressure in cases of granular kidney finds its *similimum* in the salts of Barium as far as a pathological condition can find a *similimum* in a pathogenetic effect. That is, the physical consequences are similar in both; the calibre of the arterial vessels being decreased.

[A prolonged poisoning of some of the lower animals with these salts would be of infinite service. When will Homœopathy discharge its duty?]

The chloride of Barium has also been successfully employed "in old worn-out asthmatic habits in which the disease evinces a tendency to terminate in hydrothorax."

Goullon calls attention to it when "after the disappearance of a scrofulous cutaneous eruption, an obstinate cough, (bronchitis), and even pneumonia, with copious expectoration, result."

The use of this remedy in our school has been as a cardiac irritant rather than a depresssant; that is, we have found no use for it as a "tonic" in heart failure: palpitation has been our sole "indicator." It should, however, find a place in the treatment of fatty degeneration of the heart.

Its action on the male sexual organs does not appear to have been availed of, and yet its symptomatology recommends it in impotence. According to symptom 391 of Baryta carbonica [*Vide Allen's Encyclopædia*] it "takes the cake" as a somnific!

The great substratum underlying its whole field of action is SCROFULA. Hufeland said it found its chief scope in the treatment of scrofulosis florida as distinguished from scrofulosis torpida; to which Aurum corresponds. This form is distinguished by the quasi inflammatory status which obtains. The lymphatics are in an irritated and inflamed condition; the glandular indurations and the scrofulous ulcers that exist evince a tendency towards inflammation, and the enlarged glands are apt to open and discharge.

Goullon quotes a typical case. "A male child of two years suffered from atrophy. The whole neck was covered with indurated glands of the size of an egg; the abdomen was much distended and hard; the seventh and eighth dorsal vertebrae projected posteriorly in a lump. Both ears discharged an offensive pus; tongue coated; stool produced only by enemata; faeces small in quantity, white in color, and hard as a stone; the urine yellowish and very offensive; the feet swollen." Baryta muriatica produced a complete cure in three months.

The same author cites the following: "E. K., aged one and a-half years, was covered with ulcers over the whole body; the whole head with thick, offensive crusts; abscesses behind the ears which discharged an offensive pus; fœtid discharge from the ears smelling like rotten cheese; both eyelids swollen; the bulbs of the eyes very much inflamed; photophobia, so that the child always lay upon its face; abdomen considerably swollen, thin, watery, offensive stools; both feet very much swollen." Baryta muriatica completely restored the health in six months.

The chloride of Barium has won deserved laurels in the treatment of scrofulous opthalmia. A girl of six years of age, after a year's treatment by an old school physician, was in the following condition: "Total opacity of the cornea; the sclerotica inflamed and loosened in its tissue; entire blindness; both anterior nares inflamed and sore." Under Baryta mur. "the child's eyes were entirely clear and her vision perfect."

A paper by the lamented Woodyatt, that is now buried in the

dusty "Transactions" of a State Society, is worthy of resurrection in the pages of THE RECORDER.

"Master Samuel L., aged nine, was brought to me for treatment April 1st, 1874. He looked thin and wasted with a large head, somewhat bloated, hard abdomen, legs attenuated, almost refusing to support the body, shins mottled with copper-colored spots, and painful indurations on the upper surface of right foot near the ankle. The face was much misshapen by glandular enlargements especially of the right submaxillary which protruded fully an inch. The sublingual and cervical glands were also enlarged. His teeth were decidedly characteristic of the syphilitic dyscrasia according to Hutchinson's classification. He suffered from bone pains at night. The child never had been strong, but his eyes had been well until September, 1873, when the left eye was attacked with 'inflammation.' A month later the right eye became similarly affected. From that time till April, 1874, he had received various treatment, but as it was largely local, the true nature of the disease may have been overlooked.

"At his first visit the right cornea was found densely infiltrated and opaque throughout its entire extent. The proliferation process had been most active in the center, at which point the opaque tissue protruded beyond the level and gradually sloped off to the periphery becoming more translucent by the way. Sthaphyloma had virtually commenced, peri-corneal injection was present, but more decided in the inner lower quadrant—lachrymation was slight. The left cornea was mottled all over, but in no spot as dense as the right, peri-corneal injection over three-fourths of the globe, lachrymation free and some photophobia. Vision in the right quantitative. With the left eye could count fingers at two feet. Was troubled at night with ciliary neuralgia. He received Merc. Iod. until May 15th, when the acute symptoms of the case had subsided, and the opacity had cleared slightly in the left eye; no apparent change in the right cornea. Gave Aurum met. for one month which made an impression on the cornea of both eyes, but still the progress was not rapid. This, however, was rather strange considering the nature of the disease and its usual course.

"At the American Institute my attention was called to Baryta iodata by Dr. Liebold's paper, and on my return, having been kindly supplied by the doctor with his original preparation of the drug, I administered it in this case.

"Up to this time the glands had remained as first described, hard and painful to pressure. The right cornea had cleared a

little at the upper margin, so that the iris could be dimly seen when the eye was carried well downward. Fingers could be counted at one foot with this excentric fixation. Vision in left eye had improved so that fingers could be counted at four feet scant.

"Six weeks from this time the deformity on the right side, for such it really was, had entirely disappeared. The sides of the face were now symmetrical. There remained but one enlarged cervical gland about as large as an almond. The mother reported that the boy had not been so well in years. Appetite was good, sleep was sound, spirits revived, and a troublesome enuresis had disappeared. The manner as well as the appearance of the child had changed markedly.

"The eyes were both clearing up rapidly. Very little remained in the left that could be seen by direct examination. Right eye vision, $\frac{4}{200}$; left eye, $\frac{1}{200}$. The boy could not read, so we were unable to test his near vision with any satisfaction. There can be no reasonable doubt of the full recovery of sight under this drug. Considering the state of the cornea and the patient's general condition, the progress must be regarded as very favorable indeed, and attributable almost entirely to the action of Baryta iodata.

"I have used the same drug in several cases of suppurative inflammation of the middle ear since June, and have witnessed gratifying results. The trouble followed scarlet fever, and was accompanied by enlarged glands of the neck in each case. A case of phlyctenular conjunctivitis in a scrofulous ill-fed child is now under treatment and very much improved, but hardly to be reported. The left side of the neck from the ear to the clavicle, for a width of one and a-half inches, was almost one continuous open sore when the remedy was first given. It is improving steadily, and will be heard from again. The remedy is worthy of careful study and trial."

There is one little feature in this report that should not be overlooked, namely, this statement: "The *manner* as well as appearance of the child has changed markedly." Here we have Neumann's observation furnishing a "key-note," and forever silencing those who object to symptoms derived *ab usu in morbis*. Neumann said, "Baryta muriatica seems to have a special effect on the mind. I saw scrofulous children whom I treated with this remedy become anthropophobic, cowardly, forgetful, lose their power of attention when reading, and the wish to play." Hahnemann siezed this psychical symptom with avidity because he knew what it was worth. *He* could find a characteristic

amidst a mountain of chaff; *we* cannot; but we can "criticise" him!

It has been my good fortune to make a new application of the chloride of Barium and Neumann's observation was chiefly my guide thereto.

On the 5th of July, 1890, Mrs. B. consulted me concerning her daughter, who has been affected with chorea for the past four months. She was taken from school early in March, and since then has been in the hands of a Homœopathic physician, but has steadily grown worse.

She was taken from school at first because of the failure of her memory; she could not learn her lessons, though she had formerly been a bright scholar. Soon her mother observed a curious "fidgetiness" in her legs; they were suddenly "poked out" in this way and that. Then the arms became affected, and the doctor was called.

The girl is eleven years of age, rather short in stature, and spare in flesh; having black eyes, dark hair, and sallow complexion, looking like dirty white wax. She had not been a sickly child, and no cause is known for the present attack.

Her arms and legs are in constant jactitation. She cannot feed herself, and can walk only with the assistance of another. Her face is spasmodically twitched, and her speech is unintelligible to all but her mother. All the spasmodic movements cease during sleep.

Her appetite is unimpaired; but her bowels are constipated, and she has frequent urination. It was impossible to take her pulse correctly; but her heart evinced nothing abnormal in frequency, force, rhythm or sounds.

The expression of her face was absolutely idiotic; her jaw dropped, saliva drooled from the corners of her mouth, her eyes lacked lustre, and she had a vacant look, or gave you a silly grin.

The choreic jerking began in her legs, then appeared in her arms; but the legs have always been the worse. Her speech was affected before the twitching began in the face.

None of the other children in the family have ever been similarly affected.

This case reminded me vividly of the pathogenetic effects of the chloride when given for the hypertrophied tonsils, and after brief deliberation I administered Baryta mur. 4th cent., a saturated two-grain tablet every two hours, and asked to see the patient again in two days. I did not so much expect any marked change, but was on my guard against any over action of the drug.

July 7th. Mrs. B. brought the girl and reported that she thought the jerkings had been worse. Continued the remedy and potency, but ordered a tablet every four hours.

July 12th. Called at the house. My note-book says: "Better on the 12th, especially in the feet; quieter there." Continued the remedy, potency and dose.

July 25th. The mother reported satisfactory improvement; "we all can see it." Continue without change.

August 6th. The child could not be recognized as the drivelling thing first seen a month before. Her legs are quiet, speech is distinct; no twitching of the face, and but little of the arms. As I was going away for a month, gave a large bottle of saturated tablets, and ordered four a day.

At this date the child is back in school, and is holding her accustomed place in her classes.

To-day I am wondering why Neumann's observation had not sooner led to the employment of the Barium salts in chorea. That this disease affects the mind of the patient in this peculiar manner has long been known, and I do not know of any drug that produces the *Similimum* so unmistakably as the remedy under consideration.

This is very plain to me now; but I had had the Materi Medica in my hands for thirty years before I saw it! And then it is revealed by the only therapeutic law that can make a poisoning fruitful. To Neumann this pathogenetic effect of the chloride of Barium only voiced a *caveat*; to the follower of Hahnemann it reveals the application of the poison as a REMEDY.

Ann Arbor, December 6th, 1890.

ERYTHROXYLON COCA AND SOME OF ITS CLINICAL THERAPEUTIC USES.

CASE I.—A young man of about 20 consulted me in November, 1884. The disease he complained of was palpitation of the heart, with difficulty of breathing which was generally and principally felt in empty stomach, especially while ascending any height. From a study of the history of the case, I was led to the conclusion that this young man was a victim to the *vicious* and *ruinous* practice of "*self-abuse*" from the age of 14, and which he did not give up yet. On an investigation of his case, I gathered that he had much cerebral excitement; while sitting alone, he had wild fancies; being a student, he had more liking for

mental than physical work; now and then he felt much mental depression, he apprehended evils which were not likely to befall him; his temper had become very irritable; but immediately after he lost his temper, he repented for it, and became morose. He complained of vertigo, headache, with pressive and tensive pain in the temples, and occasionally pressive pain in the occiput, also much pressive pain in the eyes, with photophobia and dilated pupils. Slight noise or sound agitated him and brought about palpitation of the heart, with weakness and acceleration of the pulse. Although he had become lean, thin and weak, yet he worked hard without any feeling of fatigue and did not feel the least necessity for food. He had much flatulence and rumbling in the abdomen. His memory was much impaired with regard to other things, but not with regard to studies, so that he could repeat *by heart* even pages of the books which he had gone through even *once*. His bowels remained generally constipated. He passed very large quantities of urine day and night, with much thirst; but whether there was any sugar in the urine I cannot say, because I did not make a chemical examination of his urine. His penis had become quite relaxed and he had nocturnal seminal emissions, with lascivious dreams almost every night. He did not sleep well even for nights together. Very frequently he had spasms in his calves during sleep or while rising from his seat or stretching his limbs.

On inquiry I learned that he had so-called *nervine-tonics* from his Allopathic physicians, and Nux. Vom. 30. and 200., Phosphorous 6. and 30., Ac. Phosphoric 6. and 30., Anacardium 12. and 30., Lycopodium 12. and 30., China 6. and 30. and Coffea 6. from his Homœopathic medical advisers. This way he swallowed Allopathic and Homœopathic medicines, as it were, by the ounce, for two years or so. He said that whenever he took any given medicine, he felt some relief for a week or ten days, and then he felt unwell again as before. On the 28th of November, 1884, I prescribed Ac. Phosphoric 1x, in one-drop doses, twice daily for a week. On the 6th of December, he saw me again, and said that he was much better. I stopped the medicine for a week. He saw me again on the 13th of December and said he was better still. That day also I gave him no medicine, but asked him to see me again after a week. He saw me again on the 22d of December, and told me that he was just the same as when he saw me last. He felt no other pain and uneasiness than *palpitation of the heart and difficulty of breathing while ascending any height.* He also felt very weak, but he felt no hunger nor any appetite for any kind of food, and yet any kind

of hard, bodily or mental work was agreeable to him. He had no seminal emissions at night, nor any lascivious dreams, but he was getting leaner and thinner daily. I was in great difficulty for finding out a suitable remedy for this patient. Accidentally, however, I remembered a case of Lencorrhœa, with most of the symptoms above enumerated, which was very successfully treated by Dr. C. T. Charles, late Professor of Midwifery and Diseases of Women and Children in the Calcutta Medical College, in the person of a *Márwári lady* at Barabázáre, some years ago with *Coca-wine*, as also what was said to us about the efficacy of the drug by him while lecturing in the class-room, in removing the exhaustion after tedious labor, and remembering the great power which Coca has of removing the feeling of fatigue in ascending hills when its leaves are chewed by the hill-men for the purpose of overcoming the feeling of hunger, I was tempted to prescribe Coca in this young man's case. I referred to our Materia Medica and found that almost all the so-called pathogenetic symptoms of Coca were present in this young man's case. Accordingly I prescribed Coca 1x, in one-drop doses, three doses daily for a week. On the eighth day, the patient came to me and said that the complaints he had had all disappeared, but he felt so very weak that he was not at all disposed to stir out a single step from his bed or seat or do any kind of work, either bodily or mental. I stopped the medicine for a week and prescribed generous diet consisting of home-made bread, meat and some fried vegetables in the morning, and bread, some vegetables and milk at night, and asked the patient to see me after a week. Accordingly he saw me on the 16th of January, 1885, when he said he felt stronger, but the former symptoms had reappeared. I prescribed Coca 1x again for a week as before and all the symptoms disappeared, but the patient again felt weak and quite disinclined to any kind of bodily or mental work. I stopped the medicine, prescribing only the same diet as before. On the 23d of January he saw me again, and said that he was positively worse, and that if this state of things continued for a week, he "would die." I did not now see my way to finding out suitable means for giving relief to this suffering poor young man. On referring to our Materia Medica, I could not hit at a better medicine than *Coca* and yet Coca had done the patient little or no good. Considering all sides of the question, I thought of giving up the case as hopeless and asked the patient to consult some other physician. He said he would not change my treatment for more reasons than one "whether he died or lived," especially because he had left no physician of Calcutta of repute

and standing (Allopathic and Homœpathic alike) untried, and that he consulted me at his father's advice who had directed him to stick to my treatment for at least six months. Such being the case, my responsibility in this case doubly increased, and I did not know as to what should be done. After much deliberation, I came to the conclusion that Coca might be the right remedy, but that its dose had to be changed. Accordingly I prescribed Coca 6x, three doses daily, for a week. On the 2d of February he saw me again, and told me that he felt neither better nor worse. I believe that any disease remaining stationary, without being better or worse, indicates a favorable sign. I again prescribed Coca 6x in the same way as before for a week after which the patient saw me again, and said that he was again *positively worse*, and that the symptoms which had been present at the time when he had first consulted me had all reappeared in a more violent form. This statement of my patient put me out of my wits. I prescribed no medicine, but advised him to take the kind of food which I had prescribed for him before. On the 18th of February, I prescribed Coca θ, in one-drop doses, three doses daily. On the second day the patient felt better. On the third day he felt better still. On the seventh day he felt quite well. On the eighth day he saw me. I advised him to take a dose of Coca θ, every night at bed time for a week; after which he saw me again, and said that he felt quite well; he felt appetite; he felt stronger than before; he ate well; he had sound sleep at night; he had no nocturnal seminal emissions, nor any lascivious dreams. The quantity of his urine became normal. I prescribed Coca θ again, a dose every other day for two weeks, after which he saw me again, and told me that he had nothing to complain of. Since then he has been doing well. He has been serving as an assistant in a mercantile firm here, and doing his work regularly till April, 1888, when I left Calcutta for a change. I was away from Calcutta for a year and a half. I did not see him till last week when he saw me. He looked so very healthy that when I saw him this time, I could not persuade myself to believe that this was the same young man whom I had treated about four years ago. He said that the last medicine which I had given him, namely, Coca θ, had *acted like* a *charm* in his case. R. K. GHOSH, M. D., *Calcutta*.

[Owing to the great pressure we have been compelled to hold the remainder of Dr. Ghosh's paper over until next number.—ED. RECORDER.]

PRACTICAL POINTS OF PRACTICE FROM THE TRANSACTIONS OF 1890.

Skipping the first one hundred and sixty pages, of Reports, etc., of the Transactions of the American Institute of Homœopathy, for 1890, (a very handsome volume), a paper is reached, by Sarah N. Smith. M.D., of New York City, on "Experience with *Kali Phos*," which, with the discussion, contains some good hints.

Kali Phos.

The first case reported by Dr. Smith was a miss, aged 13, with "general weakness, with loss of appetite, frequent epistaxis and her mother adds so nervous and irritable." *Pulsatilla* was given; in a week menses appeared and patient was better in some respects but still presented languor, weakness, heart-beating that tired her out, school and study a burden, low spirited, pale and sallow; *Kali Phos.* cured. The next case was a woman of 50 who complained of inability to be on her feet, depressed in spirits feeling certain that she would never be any better; she could scarcely raise her feet, cramps in calves at night with toes drawing up, and generally uneasy; a part, six inches in width, just above the ankle, was destitute of feeling. *Zincum*, 5m, seemed to improve her but the old depression and discouragement returned and she was sad and worried. *Kali Phos.* 30th, improved her at once in every way and "to-day she is bright and cheerful, able to attend to her family duties, with satisfaction and pleasure. Much of her trouble was doubtless caused by local trouble, as I found the os-uteri resting on the spinal column, causing great irritation."

The next patient was a widow of 40. "I found anteflexion of uterus, with cervex-uteri resting on the spinal column, but nothing serious in the condition to warrant the very peculiar, nervous condition in the patient. She was very solicitous as to her future health, weak, exhausted with slight effort; said she was thoroughly discouraged, and had no heart to doctor. She told me that she was irritable and easily displeased, which was unnatural for her." *Kali phos.* soon changed her to a "bright and jolly" woman. The next case was that of a young man who said "that he was weak and good for nothing; all broken up; nervous." *Silica* seemed to improve him, and *Pepo* brought a thirty-foot tape worm. "I thought this would complete the cure, but not so. His stomach began to improve at once, but he felt that he was far from well. I was disappointed and quite at a loss to

know what to give him." *Kali phos.* soon caused the world to look bright to him once more.

In the discussion following the reading of this paper, Dr. A. L. Monroe, of Louisville, said: "I have had considerable experience with *Kali phos.* for the past year; in fact, such an experience that I buy it by the pound, and a pound does not last very long. About nine or ten months ago I had a case of typhoid fever in a young gentleman who had a very large active brain, had speculated in real estate, and his work had been very active, trying work. After the first week or two he became so hysterical that he would cry like a child, and sob whenever he got nervous." No remedy availed until *Kali phos.* was given, which corresponded to the state and cured, nothing else being given afterwards.

Dr. T. G. Comstock said that he had used *Kali phos.* "frequently in cases of debility, low spirits, melancholia, anæmic conditions and cases of low forms of nervous troubles.

In fact *Kali phos.* seems to correspond to that form of nervous break down which is increasing among the American people, else the advertising medical fakirs would not find it profitable to spend the amount of money they are spending in advertising medicines said to cure cases, which, in general, as they picture them, resemble those outlined above.

A Comparison.

In Dr. Lilienthal's paper on the "Differential Diagnosis of the Phosphates" is found a paragraph summing up the whole subject which is especially interesting in connection with the foregoing. "In a few words the keynote to these four remedies may be given. We meet in *Kali phosphoricum*, adynamia and decay, a cry for better blood and more vitality; while in *Magnesia phosphorica* an exhuberance of vitality seems to prevail; it is a purely anti-spasmodic remedy, while all the functions of life are in their normal conditions. *Calarea phosphorica* is one of the representatives of psora, as far as development is concerned, and we meet, therefore, defects of evolution and also threatening signs of involution. In *Natrum phosphoricum* the chyloportic system is deranged and acidity the hint to its use; hence, a too-much neglected remedy in that American dyspepsia, when it will often rival *nux vomica* and other indicated remedies in its beneficent results." *Kali phos.: A cry for better blood and more vitality!*

Dr. Hale's Paper.

At the meeting of the Institute in 1889 Dr. Hale selected as his subject the Cactaceæ and sent out a circualr letter which was

published in all the Homœopathic journals. In the paper read at this meeting, which is of a general nature not lending itself to condensation, the Doctor says "I regret to say that I have received but a single response to my solicitation." In discussing the paper Dr. H. C. Allen said in reference to this: "Dr. Hale refers to the apathy which met him almost universally in his efforts to engage the attention and interest of the profession. If we only consider that for a moment it would not seem wonderful at all. It is is a continual hobby horse with our authors and journals for the last few years, how to get rid of our Materia Medica; in other words how to get rid of the symptoms. The complaint is: 'We have too many symptoms; we can't use them; we are piling up symptom after symptom without being able to utilize them.' The younger member read this and it is not to be wondered at that there is apathy in provers. Now, for one, I have never found too many symptoms in our Materia Medica; I wish we had more. I do not commit the Materia Medica to memory, neither do I intend to so do. I do not desire to memorize Webster's or Worcester's Dictionary: I use them as works of reference."

Among the Children.

Dr. Millie J. Chapman, of Pittsburgh, reported a case of chorea in a six-year-old feeble-minded child. "To feed an acrobat while displaying his skill, would have been easy compared to giving John a meal. The moans, growls and piercing shrieks he uttered at times made him an undesirable inmate of any house." An undesirable in the superlative degree, one would think, when in addition to foregoing the action of his bowels and bladder were "involuntary." Luckily for John, he finally got into the Pittsburgh Homœopathic Hospital, where, other remedies failing, *Bufo ran.* in six months improved him so far that he could feed himself, walk and talk, and was free from convulsions. "He was then removed to another home, where he has had a continuance of health with great awakening and development of mental faculties."

Another case by Dr. Chapman was a five-months-old boy, a victim of artificial food and heroic treatment for marasmus; finally, an Allopathic pillar diagnosed diabetes, and prognosed a fatal termination. Then the parents called in Homœopathy. When rational medicine took charge of the case "The prominent symptoms were emaciation, pale face, eyes sunken, lustreless, difficult breathing, abdomen hard, painful to touch, urine profuse, ammoniacal, dry cold skin; gave evidence of pain and nausea after taking food." *Iodine* was prescribed, and in twenty-

one hours there was improvement, and in twenty-one days a healthy boy.

Gynæcology.

In his paper, the Chairman, Dr. S. P. Hedges, of Chicago, said (among other things): "Allow me at this portion of my paper to ask a practical question. After diagnosis—what? Why, a prescription and treatment, of course! We must not stop with tonics, lotions and local measures of the old school. We can do more; we are expected to do more. Our law of cure must be studied and applied. If we are early in finding what is the trouble, long before local means are called for or tonics needed, our affiliated similar has begun to do its work. Quietly and deeply, in the remote recesses where the morbid process is disturbing nature's harmony, nature's remedy rapidly works. Thus the cure is begun, and nature is aided in recovering her normal health. You see we, as Homœopathic gynæcologists, need more study upon our Materia Medica."

Dr. J. W. Sweeter, of Chicago, read a paper, "A Plea for Early Interference in Malignant Uterine Disease." In conclusion, he said, "I am willing to venture my reputation on the statement that the early life of uterine carcinoma is *entirely local*, and that it can be eradicated by local methods."

In the discussion, Dr. George W. Bowen said that he had treated thirty-four cases of cancer, and lost but two of them, and he believed cancer could be cured by the use of *Arsenic;* he gave it in doses sometimes as large as one-quarter of a grain in twenty-four hours; nine-tenths of all the cases of cancer, no matter into what condition they may have gotten, are curable by *Arsenic.*"

Dr. Wm. Owens said that "*Acetic Acid* is the only drug that its provings developed the typical cancer cell. That proving was made by an Allopathic physician, and was published in Bennett's *Physiology.*" He had never used the knife in cases of cancer, but had always used *Acetic Acid*, and had cured some cases thereby. "By the knife no cases are cured."

Microbes.

The paper by Dr. Wm. Owens, Sr., of Cincinnati, O., on "The Relation of the Microbe to the Morbid Process," summed up thus: "It follows as a final conclusion that the presence of the microbe is no essential to the existence of any form of disease, and that all microbes, bacteria, bacilli, micrococci, etc., are secondary to or, possibly products of, previously existing conditions, and are not in any way the cause of them."

Eyes.

Dr. E. W. Beebe's paper contains a few very cheering paragraphs. "Experimental methods based upon pathology are unable to meet the peculiarities of these cases, hence the failures of our friends of the dominant school; for, unlike many diseases which have a tendency to recover without the aid of medicines, this, in the great majority of cases, steadily progresses with greater or less rapidity until blindness obtains." But when aid is sought in Homœopathy, "Surprising results frequently follow the administration of the indicated remedy in incipient cataract, and the improvement thus obtained is quite as permanent as that experienced in other chronic affections."

In the discussion, Dr. J.A. Campbell, of St. Louis, Mo., made the assertion that nine-tenths of the cases in Dr. Burnett's *Curability of Cataract* "were not cataracts at all," and he questioned very much whether opaque fibres can be restored. [For one bad case cured, the reader is referred to September, 1890, RECORDER, p. 235.]

Stammering.

Dr. H. E. Spaulding, during a discussion on this topic, reported having cured a case of stammering with *Agaricus* 1x, and having treated several cases with good results with medicines only, *Agaricus* being the main remedy. Dr. G. W. Bowen also believed in treating stammering medicinally, and had used *Belladonna*, *Ignatia*, and *Stramonium* with success. Dr. Blake's paper said that a neglected and foul state of the preputium and phymosis with adhesions would be revealed in many stammerers, even of the better classes.

Nervous Derangements.

Dr. W. D. Gentry's paper on "Nervous Derangements Produced by Sexual Irregularities in Boys" is one of very great interest. The numerous cures reported are really surprising, and ought to awaken attention. One was a deformed boy, one leg and arm shorter than the other, who had been treated by the doctors for St. Vitus' dance. Examination showed the prepuce adhering to the gland. This was cut away, and in two years the boy's limbs were of equal length, and his health completely restored. Another boy, seven years epileptic, dwarfish and with an "old man" look; same cause; same treatment cured. Another child, two years and a half old, deaf, dumb and blind; phimosis; same treatment, and in six months it could see, hear and speak. So through ten cases of the same, the halt and the blind; all cured by the same general treatment. "When a phy-

sician" concludes, Dr. Gentry "is called upon to treat a boy or young man suffering with any of the following conditions—stunted growth; unhealthy, 'old man' look; nervous derangement of any kind, such as incontinence of urine, sleeplessness, chorea, spasmodic neuralgia, neurasthenia, or nervous prostration, recurring convulsions, epilepsy, defective articulation, squinting, jactitations, paralysis, locomotor ataxy, inco-ordination, and similar troubles, he should look towards the generative organs as the seat of the trouble, which by reflex action produces the effect. Either phimosis, adhesion of the prepuce to the glans-penis, or irritation of the parts, will result in producing any of the above-mentioned, besides other nervous, physical or mental derangements, because the genitals of either male or female are the centres of the nervous system, and any diseased condition there will nearly always result in some nervous, physical or mental affliction."

Cancer of the Stomach.

Dr. H. P. Holmes, of Sycamore, Ill., reported a case of "Scirrhous Carcinoma of the Stomach." After treating the patient for some time, he concluded he was suffering from cancer. In time the patient went to a Sanitarium where they told him the trouble was "nervous dyspepsia." Later a Chicago physician diagnosed "hepatic sclerosis with atrophy." Again he was told that it was "Cirrhosis of the liver." Another Sanitarium vaguely hinted at "an obstruction of the duodenum. After post-mortem, "the mystery was solved by the immediate exposure of a large scirrhous carcinoma of the lower two-thirds of the stomach." Of diet: "The greatest benefit was derived from unfermented grape juice throughout the period of his sickness. * * * The quality of the preparation was found to be an essential feature as much of the so-called 'unfermented grape juice' on the market is an outrage to its name."

Rapid Mention.

A case of Hay fever, by Dr. H. C. Allen. Psoric subject, aged 76, long standing, a Homœopathic physician. *Psorinum* gave great relief; almost well.

Dr. George E. Gorham reported a case of acute gastric ulcer. *Uranium nit.*, 2x trit., cured.

Of consumption, Dr. E. W. Beebe, said: "Were I restricted to one course of treatment for this malady, it should be abundant exercise in the open air, carried to a degree to make rest feel grateful at night-fall; but never to an extent that would exhaust the patient or induce copious perspiration."

Dr. George B. Peck said: "Henry N. Guernsey's text-book is unquestionably the basis of most of our obstetric medication. This is not singular, for to rare acquaintance with Materia Medica he added unusual experience as an accoucheur."

DOWN PINE TREE WAY.

The Transactions of the Twenty-fourth Annual Meeting of the Maine Homœopathic Medical Society is to hand. It is a more modest volume than some of its compeers, but in value will hold its own.

Article 1st is the President's address by J. M. Widden, M. D., of Portland. Here is his testimony on a very important point of national interest: "Although the Allopaths are receding from their old method of antagonism by loud words and strong language, yet it is evident that they are none the less antagonistic, and that their fight is going to be made, in this, and in every other State, by means of the single examining and licensing board with a majority representation from the Allopathic school, gaining thereby a monopoly of the right of licensure. This movement, not a very new one, is growing in energy, and is indorsed by nearly, if not quite all, the old-school societies, and has been four times approved by the American Medical Association."

Dr. M. G. Briry, of Bath, treated of "Applied Materia Medica." *Nabulus albus*, he finds from experience "will have good effect in cases of chronic diarrhœa, with aggravation in the morning, and immediately after breakfast; stools profuse, and sometimes feeling hot in passing. It will be found useful in those cases in which *sulphur* and *natrum-sulfuricum* seem to be indicated, but fail to cure." *Nuphar Lutea* is another remedy from which he obtained "good results in cases of morning diarrhœa in women."

Dr. C. D. Perkins, of Rockland, read a "Study of Lac Caninum," which, he claims, is a polychrest. No clinical experience was adduced.

Dr. W. C. Stilson, of Bucksport, gave an accidental proving of Balm of Gilead buds made by a gentleman, who, although a citizen of Maine, was fond of the wine cup—or of rum. But as the Balm of Gilead of the pharmacopœia is a product of Southern Europe and Asia, the identification is too indefinite for use.

Dr. J. C. Gannett, of Yarmouth, presented "A Critical Study

of Spigelia," based on the new system of Drs. Conrad Wesselhœft, J. P. Sutherland, and others. From the brief discussion, it does not seem that the Maine doctors are very enthusiastic over new plan.

Dr. C. M. Foss, of Dexter, gave a paper of clinical cases: A man, aged 45, "had catarrh in the nose, and the same in the stomach; has been told that he has cancer of the stomach. Tenderness over the stomach, with sinking, gone feeling, at times reaching a state of painful anguish, sickness at stomach, all symptoms relieved by eating." *Chelidonium* 6x at once removed all symptoms, and for ten years he has been free from them. *Chelidonium* 1x and 2x also cured a case of pain in the stomach with tenderness, constipation, sinking at the stomach and then dull, heavy pain; abdomen bloated and rumbling of gas. The higher attenuation would not answer in this case. Several cases were given in which the 1000 potency gave quick relief, and the doctor pertinently says, "I presume we often change the remedy when we ought to change the potency. I have just as much faith in high as in low potencies. Each fills its place, and any physician who is so prejudiced that he will not use the high potencies, or will not use the low potencies, fails in his duty to his patients." Anent this Dr. Jefferds remarked that his experience showed nervous temperaments needed the high, and the lymphatics the low potencies.

Dr. H. C. Bradford, of Lewiston, reported a case of a lady, aged 70, "who had a tumor of a cancerous nature on the right side of her nose pretty well up between the eyes; it was about three-quarters of an inch long, half an inch wide, and extended out from the nose about half an inch. It discharged a thin somewhat offensive liquid from an abraded surface." *Arsenicum* 3x internally three times a day with the 2x trituration externally, according to Dr. Mitchell's treatment, for three months completely cured; after a twelve month there was no trace visible.

Dr. Nancy T. Williams, of Augusta, reported two cases of hypertrophy of the uterus. Several remedies were given in each case but *calcarea carb.* seemed to be the true remedy. The doctor concludes "I have had many cases of a similar nature and never has *calc. carb.* failed to do good work."

A number of other cases are reported, but are not of such a nature as to be easily summarized.

Ignatia.—Headache increased when smoking tobacco or taking a pinch of snuff, or from being where another is smoking.—RAUE.

REVISION OF THE MATERIA MEDICA.

It is evident that a widespread interest is being taken in the matter of Materia Medica revision. The necessity for such revision is clear to every physician who has his attention drawn to the manner in which the provings which now form our Materia Medica have been conducted.

Every practitioner of medicine must use our present Materia Medica every time he prescribes for a patient; it is to him what a chest of tools is to a carpenter. What kind of work would a carpenter turn out if his tools were dull or if his chisel should break off every time he attempted to use it?

And so with the Materia Medica; as it is constructed now, it *is not a reliable tool* with which to do the curing of the sick. All physicians comprehend this although some of them dread to acknowledge it, fearing that they may lose their confidence in the Materia Medica. If, however, confidence is placed in that which is unreliable, only disastrous results will follow in the present instance; both to the well-being of the sick and the reputation as well as the peace of mind of the physician.

Much that is in the present Materia Medica of our school is truth; it is only because there is a large admixture of what is false that renders the whole unreliable. So much seems clear.

Of what does the unreliable part consist? Chiefly of symptoms recorded as having been produced by a drug, whereas they were not. Without any proper preparation for drug proving; without taking a previous "health record;" often without experience in proving; many times in a state of ill-health, persons have undertaken to "prove" drugs. Any one who chose was allowed the privilege of selecting any substance—active or inert—making a "proving," having it printed in some journal and then recorded as part of the authentic Materia Medica.

From the adoption of such a plan as this there has been a certain result *i. e.*, the incorporation of many symptoms in our Materia Medica that were not caused by the drugs to which they are credited. And the proportions which these false symptoms bear to the true is the proportion of unreliability of the present Materia Medica.

This is the dark side of the picture, but there is a brighter side—a side on which the sun of progress is now shining. In order to see it, we must observe the efforts now being undertaken in the line of Materia Medica revision, by means of which there is a fair prospect of separating the wheat from the chaff—

retaining the true and putting aside the doubtful for future testing. This is the aim of the present effort, an effort which, in the hands of those who have made themselves familiar with the sources and character of provings, of those who will work conscientiously and critically, will result, it is believed, in the production of a Materia Medica on which physicians may rely with a confidence that cannot be shaken.

By general consent the principles on which the proposed revision is based are—

First.—All work must be based on original provings or copies of the day books of provers.

Second.—No proving shall be made use of when the preparation of the drug has been diluted above the 12th decimal.

Third.—Every symptom is retained which occurs in the provings of two or more persons.

Fourth.—Every symptom shall have appended a figure or "exponent" showing in the provings of how many persons this symptom appeared.

O. EDWARD JANNEY, M.D.

Baltimore, Md.

[TO BE CONTINUED.]

CORRESPONDENCE.

INTERNATIONAL HOMŒOPATHIC CONGRESS.

The organization and executive management of the Fourth Quinquennial International Homœopathic Congress has been placed in charge of a committee, consisting of the executive committee, and eight other members, of the American Institute of Homœopathy.

The time appointed for the Congress to meet is June, 1891; and the place selected is Atlantic City, N. J.

In carrying out the duties placed upon them, the committee desire to make such arrangements as will be most acceptable to those who will participate in this Congress, and will best serve the interests of Homœopathy, and contribute to the progress of medical science throughout the world. They hope that every physician will give to it his most active efforts and strongest influence; and that our ablest men will contribute their best thoughts, either in written essays or in personal discussion on

the topics selected. Their time of this session will be necessarily so limited that many important subjects cannot be properly considered; yet the committee desire to select those which will prove to be of greatest service to the profession, and to have them presented by those most competent to the task; to this end they ask suggestions from those interested.

The usual five days session of the American Institute of Homœopathy will give place to this Congress. The Institute will assemble, however, on the day preceding the Congress for the transaction of necessary business. The plan now proposed is that the Institute shall hold its session on Tuesday, June 16th, 1891; the Congress will assemble Wednesday, June 17th and continue one week, namely: Wednesday, Thursday, Friday, Saturday morning, (with rest Saturday afternoon, and Sunday,) Monday and Tuesday; closing on Tuesday, June 23d.

Organization.

The Congress will accept as members all Homœopathic physicians, in good standing in recognized Homœopathic Medical Societies; and from places were such societies do not exist, physicians with suitable credentials. Delegates will be received from any and all Homœpathic Institutions, and will be expected to prepare reports of them. Visitors will be admitted, whether physicians or laymen, who may be interested in the subject of Homœopathy.

The officers of the Congress will include representatives from all the important Homœopathic Medical Societies; and the committee request that the names of the president and recording secretary of such societies be forwarded to them before May 1st, 1891.

Subjects for Consideration.

The Congress will secure statistics of the present status of Homœopathy and its progress in the last five years, as far as possible from all parts of the world. This will include the number of its practitioners, its institutions, national societies, state societies, local societies and clubs, general hospitals, special hospitals, infirmaries and dispensaries, colleges and medical schools, training schools for nurses, and medical journals. Their scope, organization, government, how to be conducted, methods of support, form of reports, and various matters of importance to each kind of institution, will be carefully considered. Essays and discussions will be prepared on the Materia Medica, Homœopathic therapeutics in surgery, and in special forms of disease, such as insanity, disease of the nervous system, of women, of

children, of the chest, throat, eye and ear, alimentary tract, kidneys, etc.

In arranging these many subjects to the best advantage, the committee ask your suggestions and assistance. All communications may be sent to the chairman, T. Y. Kinne, M.D., Paterson, N. J., or to the secretary, Pemberton Dudley, M.D., corner of Fifteenth and Master streets, Philadelphia.

By order of the joint committee the chairman and secretary are under instructions to make up and submit to the other members of the committee a list of subjects, and of writers any debaters, to be appointed; at as early a day as possible this duty will be performed, and in due time, thereafter, another circular will be issued, embracing a programme for the Congress.

T. Y. Kinne, M.D., *Chairman;* Pemberton Dudley, M.D., *Secretary;* E. M. Kellogg, M.D., *Treasurer;* R. Ludlum, M.D.; J. H. McClelland, M.D.; T. M. Strong, M.D.; I. T. Talbot, M. D.; J. W. Dowling, M.D.; J. P. Dake, M.D.; B. W. James, M. D.; O. S. Runnels, M.D.; T. G. Comstock, M.D.; F. H. Orme, M.D., *Committee.*

DR. GARDNER'S LAST WORD ON THE "RED LINE."

To The Homœopathic Recorder.

By the last issue, 1890, we see that the already famous "Red line" of the "gums" is likely to assume so many hues of color that I am reminded that the discussion may become tedious, not only to me, but to you and your numerous and intelligent readers; hence I will narrow the scope of this article down to my own text, viz., "Mercurial red line of the gums." By this method I will best attain the principal object of my first article, viz., to bring the subject before your readers, and at the same time avoid tedious discussion. My first object has been partly realized as acknowledged by my friends article, Edward R. Snader, M.D., above referred to. I will further allude to the able and learned article by reiterating what I said in my first, lest some careless reader of his effort might infer that I did say, that all red lines along the gums were produced by mercury. What I said was this, as I remember it: That mercury was as sure to produce the red line along the gums as a fatal dose of prussic acid was to produce death when administered to persons. Of course, I meant that the exception accorded to all general rules should be allowed this one. I will here take the liberty of

quoting from some old friends of mine whose lids I have not opened before for over thirty years, or since I adopted the new (Homœopathic) practice. The first one I put my hands on in the library was *Beck's Materia Medica*, and turned to page 165, and read: "The first symptoms of salivation are tenderness and swelling of the gums, * * * and at the parts surrounding the teeth of a deep red." Next in the *National Dispensatory*, by Stiélle and Marsh, page 738, I read: "A red line may be observed along the gingival attachments of the lower incisors, and then of the remaining teeth."

Next in *Woods' Practice of Medicine*, vol. 1, page 533. I read: "Among the first indications of the action of Mercury are * * * a slight redness and swelling of the gums, particularly about the necks of the lower incisors." Here I stopped communing with my old friends; why go farther; the details I read there of the disastrous effects of Calomel and of the Calomel age sickened me. Then I thought of the possibility of a second Calomel age, prevailing on my side of the house again; eh Gad! that nauseated still more and I tried hard to forget the whole subject but it will not "down." Any man of experience will recognize the true mercurial red line along the gums and distinguish it from the pseudo red line caused by tartar and other debris irritants of the gums, if uncomplicated, at a glance: but if in some cases he may have doubts, these questions put to and answered by the patient will settle it. If he is a new doctor and sees the red line and has doubts as to its identity, he would likely ask the patient if she or he had taken Calomel; of course she would not know but would state that Dr. —— had given her powders, or tablets, and since taking which her teeth had began to feel too long and sore, and she had a bad taste in her mouth; and her mother said her breath was disagreeable. The next question would or should be, what kind of taste? She will say, Well, I can hardly describe it, but some kind of a metallic taste; well, the case is nearly made out and he asks further if the submaxillary glands are sore, and she begins to feel, and he knowing their exact location, places his finger on them, and she exclaims, why, yes, how they hurt, and I had not noticed it before, and the case is clearly made out. The red line of her gums is a clear case of mercurial action. The other symptoms will occur; one more I will mention, and leave the rest of the horrible tale of mercurial action to those who wish to read it in the books on the pages I have indicated. The other symptom is a white film spreading itself over the red line or gums when wholly red, so light and delicate that

in some instances it may be brushed or rubbed off with the finger, leaving it a bright red again. This is undoubtedly also from mercurial action.

Rumor whispers, occasionally, in loud tones, of the approaching calamity of another calomel age beginning to dawn. Would the number of red lines of the gums noted by the distinguished Dr. Snader, in the absence of proof to the contrary, help establish that rumor? If the mercurial red line of the gums is present, all the other concomitant symptoms are present, also, in the same case. The old school physicians would call the above mercurialisation benign, and in his hands, barring accidents, would conduct it through to a favorable termination, save perhaps, and most likely a mercurial diathesis for the patient to endure for years. Then he has what he calls a malign mercurial action, which would be described as characterizing almost every fatal disease human flesh is heir to. He would have Mercurial Diphtheria, Laryngitis, Mercurial Bronchial Consumption, Mercurial Phthisis Pulmonalis, Mercurial Syphilitic Chancre, Bubo, Nodes, Necrosis, Swelling and Ulceration of the Glands, Mercurial Typhoid Fever, all from some slight accidental cause, such as giving the Calomel when the fever is high, similarity of symptoms for which it is prescribed, a shower wetting the patient, a cold draught of air, a cold drink of water, etc., whilst under the influence of Mercury. Cowperthwaite says: "Mercurius acts profoundly upon the entire organism affecting both the function and substance of every organ and tissue of the body * * * The therapeutic range of Mercury is so great, including as it does to a greater or less degree, almost every diseased condition to which flesh is heir."

This malign mercurial action (so-called by the old school) on the human system as recognized is, when occurring with other diseases with similar symptoms, which is generally the case, most destructive to human life and perplexing to the physician in charge. He would often give his best efforts free of charge if by so doing he could be sure whether he had a mercurial disease or a natural one to contend with. The patient in some cases if he understood his condition would give hundreds of thousauds, yea millions, to have his case understood. "All that a man hath will he give for his life," and the stake here is very great. To the Homœopathic physician this mercurial action is malign, the moment it shows its general action by the red line of the gums. This over action aggravating rather than curative in its effects, and if he understands its true condition will begin to antidote, but if he does not understand it, he

would probably give more Mercury, as it will appear to be indicated.

Within the last few years, owing to the popularity of the Homœopathic school, we have had numerous accessions to our ranks of men ambitious for distinction and gain, with little regard for true science and correct principles of practice, without any capacity to endure privation or ridicule for the sake of truth. You can soon recognize this class of men when you once begin to hear them talk. They will tell you that owing to the poverty of the Homœopathic literature, and our imperfect knowledge of the action of drugs, that it becomes not only our privilege, but our bounden duty to resort to empirical practice. Well, the two principal empirical remedies in their estimation, are Calomel and Quinine; that is if they happen to let it leak out which is their choice. Quinine with them covers a large scope, and saves much perplexity studying out the remedies. Calomel is so general in its action too, and so easily covered up or concealed under a little sugar of milk that there is little danger of detection; knowing that if detected they would be unpopular with the persons under their charge. Such men ought to retire from this beautiful temple erected by Hahnemann and his faithful followers in so short a period of time, and go and join their Eclectic brethren; but they probably would not have them without two or three years preparatory course of study. The Allopaths would reject them after their trying in vain to answer a few questions as to the scope of the action of Calomel, and as to how to use it without injury. We ought to drive them out of our company because of the question of who shall retain the honor of inscribing for all time on our escutcheon the name of that head of all medical literature, Samuel Hahnemann. If these fellows are allowed to remain with us and dishonor our beautiful structure, whose foundations are truths enduring, history may yet repeat itself again and again, as it has before, and the escutcheon of the old school will yet read thus: Hippocrates, Galen, Harvey, Jenner and Hahnemann, the last and the greatest of them all. I predict greater changes in medicine in the next fifty years than has occurred in the past fifty. The Pasteur and Koch excitement are turning the attention of the world in the line of our doctrine of Similia Similibus Curanter. I accept Dr. Snader's answer to my criticisms of the red line of the gums, as kind, manly and truthful, and wish him a successful future, and say to him as he has claimed me as a fellow practitioner, that I retired from active practice in 1860 and only acted in consultations after that for awhile; but have even ceased to act in that capacity for a long

time past. "Hold that fast which thou hast, that no man take thy crown."

Respectfully yours,

A. P. GARDNER, M.D.

Elmhurst, Pa.

P. S.—My assertions above could all be backed by quotations of the highest authority of authors, but your patience will, I fear, be already taxed to the extremity of endurance. A. P. G.

VETERINARY DEPARTMENT.

SOME VETERINARY CASES FROM PRACTICE.

Reply to an Inquiry.

What books are the best to gain the knowledge to practice Homœopathy in Veterinary practice successfully? I will recommend to the educated veterinarians at the old school, first, *Manual of Pharmacadynamics*, by Richard Hughes; *Hering's Materia Medica;* also, *Homœopathic Veterinary Practices*, published by Bœricke & Tafel. To farmers, foremen of stables, etc., the Homœopathic Veterinary Practice will be all that is necessary.

Leucorrhœa (Whites).

The mare Darbe, owned by Dr. B. Waddington, for the last ten years, had a chronic discharge from the vagina, of a glutinous and inodorous character. She discharged daily two quarts and more, has been treated by several old school veterinarians, and by the doctor himself, but to no avail. She has been served by the stallion several times each year, but never became pregnant, although she came in heat regularly, and took the stailion very willingly.

Dr. B. Waddington called me in to examine the mare and to give my opinion.

Examination revealed the following:

Mare Darbe a good blooded mare, 16 hands high, 15 years old, well built, rough looking hair, ravenous appetite, dull look at the eye, phlegmatic in her actions, (had been a very free and spirited animal formerly). Vulva, vagina and uterus as far as perceptible spotted with vesicular eruptions, also the loins and abdomen effected with same vesicles; the discharge from the vagina, as above stated, was enormous daily; otherwise sound. The owner could give no cause for the disease.

PROGNOSIS—Unfavorable.

TREATMENT—First week. *Calendula* internally and externally lotion of the same with no marked results.

Second week. *Hydrastis*, the same as above, no results, except a few more vesicles on the abdomen; discharge the same. I will right here admit that I was rather down-hearted about this case, and I half made up my mind to tell the Doctor that I was unable to cure the animal, but Homœopathy was at stake, for Dr. Waddington is an Allopath. Just at the time I was considering what to do, the thought came to me, don't try to cure Leucorrhœa, *but treat the Symptoms* like a Homœpath, and sure enough, I prescribed *Graphites* 6x and left enough medicine for 2 days. On the third day I went to see my patient. My dear friend, Dr. Waddington, received me with a smiling face, and told me that Homœopathy did not do his mare any good, just the reverse, the mare was spotted all over the body with vesicles, some parts entirely raw from rubbing, but the discharge from the vagina was less, also appetite somewhat impaired. I examined the mare again and was perfectly satisfied with the result of *Graphites*. I told the Doctor so, also that I felt quite confident that I could make a perfect cure of her; but that was too much for the Doctor; he could not understand it, he spoke of impossibilities, etc., etc. Still I kept the mare under *Graphites*, only gradually higher potencies, and she is sound and well now, and in the 7th month of pregnancy.

Inversion of the Uterus—(Falling Down of the Calf Bed.)

Mr. T. Hart, a farmer, called on me to attend to one of his cows. On my arrival at the farm I found a three-year-old heifer having had a calf three days previous, without any assistance; cow and calf appeared to be in excellent health till next morning early, the cow became uneasy, and had marked symptoms of labor pain, she kept up straining till the uterus was expelled. Mr. Hart reduced the uterus twice that day, but of no avail; every time as soon as the uterus was reduced the cow strained and protruded the same again. The next day at noon he called me. On my arrival I found the cow laying in the barnyard completely exhausted, the uterus looked dark brown, very much lacerated, enormously swelled up, and felt hard like leather; all in all she looked to be a hopeless case. At this time the uterus had been exposed for 36 hours.

TREATMENT—One bottle of good claret wine boiled with two bottles of water, given gradually within one hour. The uterus I bathed with German chamomile flower. This, till it got softer, cleaning the uterus carefully from all foreign matter; also, parts

from the adhering placenta. I then commenced to return the uterus, which I was able to do after about one hour of manipulating by having my arm inserted. I held it in its place for about another hour, removing the arm very carefully. I put two suture through the labia majora. The stable was now so arranged that she would stand about one foot higher with the hinder extremities. We then assisted the cow to get up, which she did after some effort, guided her to the so arranged stable, and applied the Lunds truss. For twenty-four hours I kept her under the influence of chloral hydrate and cold-water bags across the sacrum. Second day of treatment, removal of cold bags, warm oatmeal drinks. *Pulsatilla*, 10 drops every hour in water; cow improving, and got well.

Azoturia.

A diseased condition quite frequent with horses, especially mares, in the Autumn.

Mr. Bowen, a resident of this city, called on me with the following history of his mare: "This morning I harnessed my mare intending to drive to Woodstown. The mare seemed quite well and playful. I started and drove about two miles when the mare commenced to prespire profusely; she became suddenly lame in the hind extremities, and all at once she was, as it were, struck down." He tried to get her up again, but was unable to do so.

On my arrival I found the mare lying on the road, with a complete loss of motor power of the posterior extremities, tremors and violent spasmodic twitching of the large muscles at the loins and gluteal region; the perspiration was still excessive. Pulse, 85 beats per minute; temperature, 105½. Conjunctivæ highly congested.

I gave orders to remove the mare to the nearest farm, which we accomplished by having her loaded upon a low sleigh. At the farm we fixed up a nice warm, well ventilated box stall with plenty of bedding.

Next I drenched her with *Senna θ* half ounce diluted in one pint of water. Enemas of hot water and fomentations on the loins by means of woolen cloths wrung out from hot water.

Next I extracted the urine by the use of the cathedar to the amount of about two quarts, some of which I took for chemical examination. The urine was of dark brown color with a specific gravity of 1.120 and great excess of uric acid. Evening I visited the mare again, she looked a great deal relieved. Pulse and temperature lowered, perspiration stopped, another drench consisting of two ounces of chloride of sodium in one pint of warm

water. I ordered the mare well covered with woolen blankets and left alone during night.

Next morning early I started to see my patient; at opening the door of the box stall, she pleasantly surprised me by lifting her head, looking around and neighing. Temperature 102. Pulse 46, general good appearance. Extracted the urine, the same looked more natural in color, and contained less of uric acid. My slinging apparatus was fastened, and with the assistance of six men I was able to raise the mare; she helped herself quite a good deal under the circumstances. We placed her in the slings comfortably, a bran mash and some water were given, which she relished; also, some good hay. The clonic spasms of the glutal muscles were not so frequent, but still severe.

The treatment consisted now of *Senna* IX, 10 drops in water every two hours; the mare recovered very rapidly under this treatment, the only change I made was that I gave *Senna* from day to day in higher potencies at longer intervals. After two weeks' time she was out of danger, and after the third week went to work again.

OTTO VON LANG, V. S.

Salem, N. J.

BOOK NOTICES.

Boenninghausen's Therapeutic Pocket-Book. New and Revised Edition. By T. F. Allen, M.D. Pp. 484. Philadelphia, 1891. Flexible and Full Turkey Morocco. $4.00.

At last this long looked for book is before us, and "Boenninghausen" from a promise becomes a tangible reality, and a very handsome one, too, as books go. The paper is of very fine quality, thin, but tough and opaque, the kind that stands long wear and use. The binding is in full Turkey Morocco, flexible, and is all a book lover can desire for a pocket-book. The printing is from new type throughout, and is done in the highest style of the pressman's art. As for the editorial work, the name of Dr. Allen is a guarantee that it is most conscientious, careful and accurate, just the work needed on a text-book. The Preface to the new edition reads as follows:

"BŒNNINGHAUSEN'S POCKET-BOOK has proved so invaluable to all conscientious Homœpathists, that every edition has been exhausted and the need of a new one is pressing. In preparing this, new remedies have been added, to bring the book up to the present time. These additions really represent the advance of Homœopathy since Hahnemann's period. The additions surpass in number the remedies contained in the original. Many, indeed, are not excelled in importance by any of the older ones. In mak-

ing these additions, clinical experience has been consulted freely and our symptomologies have been scrutinized by the light of this experience."

"The lists of drugs, under the various rubrics of the original, have not been altered, except in some cases to elevate the rank of the remedies, a proceeding amply justified by their increased usefulness. For example, under 'Orbits,' *Rhus* has been elevated to the very highest rank."

"The Relationships (Chapter VII,) of a part only of the new remedies have been added, and this work has been underdone rather than overdone, for much remains to be determined, and it must be confessed that most of our new symptomatologies have not borne the searching light of clinical experience so well as those left us by Hahnemann. In this chapter we need more help from critical students of symptomatology and Homœopathic therapeutics."

"It is confidently expected that this little book will serve to give an impetus to a closer study of symptomatology, from which alone the most successful results at the bedside are to be obtained."

"It must be borne in mind constantly that this is intended only as a guide to the proper remedy and in no way should be used to supersede the Materia Medica."

"In this edition, the drugs are divided, as in Bœnninghausen's Original, into five ranks; as follows:

CAPITALS.
Antique.
Italic
Roman.
Roman in parentheses (rarely used)."

With this book in hand the physician who seeks for the remedy covering the "totality of the symptoms" finds his search most powerfully aided, for therein is the entire Materia Medica in a nutshell; every symptom great and small, or obscure, is noted.

At first glance it may appear as though the price was rather high, but when several things are taken into consideration, it will be found to be really low. Some of these we have noted already in the fine material and work; but a very important one in this matter remains to be spoken of, namely, the type. Five kinds of type are used throughout the book, and any one who knows anything about type-setting needs not be told that this kind of matter is about the most expensive kind of composition employed.

The Poultry Doctor. Including the care, and Homœopathic treatment of chickens, turkeys, geese, ducks, etc. Boericke & Tafel. Philadelphia, 1891. 85 pages. Cloth, 50 cents.

This book is entirely new and without doubt the best work on the ailments of fowls and their treatment ever issued, and ought to have a large sale. Mr. P. H. Jacobs, editor of the *Poultry Keeper*, the leading authority on the subject of fowls, carefully went over the part describing the various diseases and pronounced it very accurate indeed; he made some slight alterations and many additions in the way of making the descriptions fuller. The appearance of this work is timely, for Homœopathy is attracting great attention at present among poultry men.

The Rubrical and Regional Text-book of the Homœopathic Materia Medica. Section on Urine and Urinary Organs. By Wm. D. Gentry, M.D. Hahnemann Publishing House. Philadelphia, 1890. Cloth. 239 pages. $2.00.

If the plan of this work, and the execution, meet with favor, other sections will be published in rapid succession. The author's own words will best describe what the plan is: "This Materia Medica differs entirely in arrangement from any work heretofore published. It is *rubrical*, because it gives *only* symptoms which may be underlined with red ink as perfectly reliable. It is *regional*, because it is in sections, and each section is devoted to a region or organ. It is truly a *text-book*, because it has wide spaces between the symptoms to provide a receptacle for future provings, clinical symptoms, notes or observations, and for gleanings from other works and periodicals. Therefore, it is called the Rubrical and Regional Text-book of the Homœopathic Materia Medica." The symptoms of 372 remedies make up the book; these are indexed as follows: first comes the number of the remedy, then its text-book name, followed by common name, abbreviation, and finally page, thus: "76 Bovista. The puff-ball. Bov. 62." The design of numbering the remedies is that the number may be used in writing prescriptions, or on the label or cork of vial given to patient; also, in order that the numbers may be used in correspondence or in articles for publication; "and if all the sections are published, each section will receive a number, so that a section, a remedy and a symptom may be referred to as commercial men refer to the year, month and day." It is evident that much care and study must have been bestowed to produce a work like this. Being something new in the way of arrangement, experience alone can determine whether it will supersede other arrangements. The book is well printed, and on the usual generous Hahnemann House paper.

A Manual of Auscultation and Percussion. Embracing the Physical Diagnosis of Diseases of the Lungs and Heart, and of Thoracic Aneurism. By Austin Flint, M.D., LL.D. Fifth Edition, Thoroughly Revised by J. C. Wilson, M.D. Lea Brothers & Co., 1890. 268 pages. Cloth, $1.75.

The value of this manual, the editor, Dr. Wilson, thinks lies in the appropriateness of its style, the accuracy of its statements, its scientific method, and the practical treatment of subjects at once difficult and essential to the student of medicine. In respect to these qualities it stands, and will long stand alone among the books devoted to auscultation and percussion. Five editions speak well for any work especially for one not sensa-

tional. The book is divided into twelve chapters—Introduction, Percussion in Health, Percussion in Disease, Auscultation in Health, Auscultation in Disease, Physical Diagnosis of Diseases of the Respiratory Organs, Physical Conditions of the Heart in Health and Disease, Heart Sound and Cardiac Murmurs and, lastly, Physical Diagnosis of Disease of the Heart and of Thoracic Aneurism, the whole, needless perhaps to add when the publishers are known, well printed on good paper.

Intestinal Surgery. By N. Senn, M.D., Ph.D., attending Surgeon Milwaukee Hospital; Professor, Principles of Surgery and Surgical Pathology, Rush Medical College, Chicago, Ill. Chicago. W. P. Keener. Cloth, 269 pages. $2.50.

The first part of this work contains a résumé of the best literature on the surgical treatment of intestinal obstructions and the advice given to the surgeon who is confronted by certain anatomico-pathological conditions is based, the author claims, on clinical experience and the results of experimental investigation. The second part represents the author's original work especial attention being given to the surgical treatment of intestinal obstruction and the diagnosis of perforation of the gastro-intestinal canal. An excellent table of contents and a complete index add to the value of the work. One case of gun shot wound of the abdomen, with eleven perforations of the intestines is reported. It occurred on September 9, and on November 4 the patient was discharged cured.

A Mystery of New Orleans. Solved by New Methods. By Wm. H. Holcombe, M. D. J. B. Lippincott Company. Philadelphia, Pa., 1890. 332 pages.

The mere announcement of a new work by a physician and writer so widely known and respected as Dr. Holcombe will be received, we feel assured, with interest. The present work is "a novel, written not without a purpose. To illustrate the new discoveries in physio-psychology, with certain notes of warning." Briefly put, the *Mystery of New Orleans* is a detective story in which the detectives are "sensitives," who unravel a murder case, twenty years old. The reader is given a glimpse of the magical world, that exists and has always existed notwithstanding the denials of hard-headed men, and which is now invading the world of science, or which science is exploring, as you please. The argument is that hypnotism is a terribly dangerous power in the hands of an evil man, but a beneficent one when exercised by the good. Our opinion (perhaps out of place in a book notice) is, that the power must be an evil one at

all times—the utter loss of free-will and rationality and the substitution of another's will is, while it lasts, far worse than bodily slavery. To those who are acquainted with Dr. Holcombe's works it is needless to add that the style is entertaining and excellent. As a novel, in short, *The Mystery of New Orleans* is a success.

Rectal and Anal Surgery, with Description of the Secret Methods of the Itinerant Specialists. By Edmund Andrews, M.D., and Edward Wyllys Andrews, M.D. Second Edition. Revised and Enlarged. W. T. Keener, Chicago. Cloth. 140 pages. $1.50.

The first edition of this work appeared during the latter part of 1887, so as the average medical work goes, it has met with fair sale. It is written to answer two questions, *i. e.* "What are the best modern methods of diagnosis and treatment known to the regular profession?" and, "What are the secret methods of the 'specialists,' and what their value?" For those who want to practice "rectal surgery," this is, perhaps, about as complete a book on the subject as they can find. The authors, who are connected with the Chicago Medical College, and are Surgeons to the Mercy Hospital of that city, frankly say in their preface: "The Modern Western 'Rectal Specialist' is a lineal descendant of the original pile doctor," who, although a "quack," yet "Regular physicians were for a number of years wholly at a loss to account for the success which these itinerants obtained." The "secret," in brief, was the hypodermic syringe.

History of the Homœopathic Medical Society of Eastern Ohio. Paper. 50 pages.

Dr. T. T. Church, of Salem, O., Secretary of the Society, favors us with this little bit of local history. It gives a resumé of the doings of the Society since its organization in 1866. The members seem fond of dropping into poetry, there being three attempts in the little work; after scanning a few lines the conviction grows that the writers are better prescribers than poets; the Heavenly Muse hitched to the subject, "Constipation" seems sort o' revolutionary, even anarchistic.

A Text-Book of Materia Medica, Pharmacology and Special Therapeutics, with many new Remedies of late introduced. By I. J. M. Goss, A.M., M.D. Second Edition. Chicago. W. T. Keener. Cloth. 586 pages. $5.00.

The Practice of Medicine or the Specific Art of Healing. By I. J. M. Goss, A.M., M.D. Chicago. W. T. Keener. Cloth. 569 pages. $5.00.

These two Ecletic text-books are from the pen of Dr. Goss, of

Marietta, Ga., formerly Professor of Materia Medica, and at present Professor of the Practice of Medicine, in the Eclectic College at Atlanta, Ga. The Materia Medica is dedicated to the scientific, liberal-minded physicians of the United States, and within its covers one may find the greater part of Eclectic Materia Medica, while the other, as its title indicates, is devoted to Eclectic practice, something which, in the wide embracing Eclectic school, it would seem would be rather difficult to bring within one volume. The Materia Medica contains some very good and quite interestiiig matter, especially that which treats of our southern medicinal plants. It appears that the medical profession is indebted to the author for *Chionanthus Virginica*. When a student he had the jaundice, and his preceptors salivated him with merçury until death was near; then he took *Chionanthus*, an "old woman's remedy," and made a remarkable recovery; later he reported it to Dr. Scudder's journal. One very noticeable thing to Homœopaths, is that later on in the work, the author says of the remedy, *Chionanthus*, "*In very large doses it has produced ptyalism*;" he does not italicise the fact, but we do, because it proves the cure was made on Homœopathic principles. Both works are very well printed, and on a good paper.

Chemical Lecture Notes. Taken from Prof. C. O. Curtman's Lectures at the St. Louis College of Pharmacy. By H. M. Whelpley, M. D., Professor of Microscopy and Quiz Master of of Pharmacognosy and Botany in the St. Louis College of Pharmacy. Third Edition. St. Louis, 1890. Published by the Author. 211 pages. Cloth.

This handy little volume is designed for the students of pharmaceutical and medical colleges, and may be of use to all who desire to look into chemistry or refresh their memories. Although a book on chemistry at first glance seems about as intelligible to the average man as a Chinese tea-chest card, yet it is not so difficult as might be supposed when once the sign language is comprehended, and that is not insurmountable.

Pocket Medical Lexicon. Being a Dictionary of Words and Terms used in Medicine and Surgery. Collated from the highest authorities and brought up to present date. By John M. Keating, M. D. and Henry Hamilton. Philadelphia, 1890. W. B. Saunders. 280 pages. Cloth, 75 cents. Leather tucks, $1.00.

This compact little book strikes us as possessing unusual excellence; not only does it embrace a very full scope of medical terms, but its definitions are happy—are English. Here are a

few to give the reader an idea: "NEURALGIA. Nerve-ache," etc. "CEPHALODYNIA. Pain in the head, headache." "ATRAMENTAL. Ink-black." "APHONIA. Voicelessness." "ACUTENACULUM. Needle-holder." All the words are by no means defined in this terse manner, but the definition goes right to the point. "Homœopathy" is defined in a much fairer manner than by Dunglison; it is: "Hahnemann's system of medicine, assuming that such agents cure disease as in state of health produce similar symptoms." Dunglison opens his definition by asserting it to be "a fanciful doctrine," etc. If any of our readers want a small medical dictionary we think they will find Dr. Keating's the most satisfactory.

Essentials of Practice of Pharmacy. Arranged in the form of Questions and Answers. Prepared especially for Pharmaceutical Students by Lucius E. Sayre, Ph. G., Professor of Pharmacy and Materia Medica, of the School of Pharmacy of the University of Kansas. W. B. Saunders. Philadelphia, 1890. Cloth. 179 pages. $1.00.

An excellent little book for students of old school pharmacy. The questions are arranged in sequence, and follow each other in their logical order; the answers are clear and easily understood.

Essentials of Minor Surgery, and Bandaging, with an Appendix on Venereal Diseases. Arranged in the form of Questions and Answers. Prepared especially for Students of Medicine, by Edward Martin, M.D., of the University of Pennsylvania. W. B. Saunders. Philadelphia, 1890. 166 pages. $1.00.

The aim of this work is well indicated in the title, and it has been well carried out. To a Homœopath the treatment given for secondary syphilis is as rank as the disease: A quarter of a grain of the protiodide of mercury three times a day, increasing the dose each day by a quarter of a grain until the constitutional effects of mercury are produced, and then the amount is to be reduced to one-half, and kept up for eighteen months. After eighteen months mercury is still continued, and five to ten grains of iodide of potassium three times a day is to be added and continued for six months or a year. Whew! If patients only knew the contrast between such treatment and the Homœopathic, the Homœopathic doctors would wax fat.

Insomnia, and Other Disorders of Sleep. By Henry Lyman, A.M., M.D. Chicago, 1885. W. T. Keener. Cloth. 239 pages. $1.50.

This it will be observed is not a new book, bearing the imprint, 1885, yet probably little new has been discovered since

then on the rather occult subject of sleep. It contains seven chapters, treating of the cause of sleep, insomnia, remedies, treatment, dreams, somnambulism and hypnotism; or, as it is put, "artificial somnambulism."

The Fourth Annual Report of "Helmuth House," 41 East 12th street, New York, is to hand, in an elegant 24 page pamphlet. There were 321 patients treated, 176 operations performed, while the deaths were but 4. Surely this is a most excellent showing.

We acknowledge receipts of two pamphlets, reprints, by A. B. Norton, M. D. "Can headaches and asthenopia resulting from Hyperopia, be relieved without Glasses?" and "Acute Glaucoma."

Dr. Senn's "Diagnosis and operative treatment of gunshot wounds of the stomach and intestines" read at the Tenth International Medical Congress; and reprinted from the journal of the American Medical Association, is a very handsome pamphlet of 83 pages. A work on surgery by Dr. Senn is noticed in this number of THE RECORDER.

Eczema Squamosum Cured with Arsenicum Jodat.—A mam, æt. 38, came to the Hom. hospital, in Leipzig, on March 11, seeking relief from an attack of Eczema Squam., with which he was afflicted since about six weeks. It commenced as a small knot beneath the corner of the right eye and spread from there in a short time over the body, covering everything except the feet and the under side of the upper and lower thighs, the seat, the back, the upper arms and the hairy part of the head. The parts were covered with a dry, scaly eruption, accompanied by a violent itching; it was interspersed with a few reddish and moist spots. Patient often feels chilly, sleeps restless, is constipated. Received Arsenicum Jod. 4x, 2 grains three times a day dry on the tongue. Within two days a marked change for the better was observed, the skin was less dispanded, the sleep was quieter, the stool became reguiar, an evacuation occurring once or twice a day, and on March 24th the patient was dismissed cured.—*Dr. Stippt. Physician to the Hom. Hospital at Leipzig.*

ACCORDING to the Paris correspondent of *The Lancet*; Dr. Pecholier has been having favorable results with the "grape cure," or really with grape juice, as his patients used only the juice, rejecting the other parts of the fruit. Two cases are mentioned one with "cardiac disease and the other the subject of hepatic cirrhosis with ascites" and the treatment gave "the best results."

COLLINSONIA CANADENSIS.

Dr. Joel F. Hammond, of Atlanta, Ga., contributes a very interesting paper on this remedy to the September number of the *Dixie Doctor*. "Collinsonia," he says, "possesses one very marked peculiarity: the active principle is strangely volatile. Only a few hours' exposure is sufficient to greatly impair its virtues, while a few days' neglect renders it wholly inert." He recommends the Alcoholic tincture made from the fresh plant.

"As a therapeutic agent, stone root [Collinsonia Can.] is a most positive and valuable remedy. I have prescribed it daily for more than twenty years, and feel that I may speak positively of its virtues. We are told by the old authors that stone root is a stimulant and irritant. I know it to be a most excellent stimulant, but cannot agree with the bookmakers that it is an irritant. To the contrary, it is a most soothing and agreeable remedy, exerting a specific influence upon unhealthy mucous tissues, and quieting in the most pleasing and satisfactory manner irritated nerve centres. We find it a most positive and satisfactory remedy in the treatment of chronic catarrhal conditions, especially catarrh of the stomach, bowels and bladder. It is also a most valuable tonic, a positive diuretic, diaphoretic and mild laxative. I have found it of the greatest value in the treatment of catarrhal conditions of the nasal cavities, and especially of the pharynx and larynx, while it exerts the most positive influence upon the organs of respiration. For instance in the treatment of tubular and capillary bronchitis; but it is in the treatment of the latter, so fatal to the extremes of life—infancy and old age—that we find cillonsonia of the greatest therapeutic utility. For instance, the practitioner is called to attend a child from eight to ten years, and the first glimpse tells him the function of respiration is so embarrassed that the blood is not being sufficiently oxidized to maintain life. The old plan—ammonia carb. and alcoholic stimulants—will not restore the suspended or greatly impaired function. We know by actual experience that, while those remedies are valuable, they often fail; but there is a remedy, both directly and adjunctively—*collinsonia canadensis*. If there are indications of marked catarrhal complications, I have found stillingia of the greatest adjunctive value."

"One of the most positive powers possessed by the *Collinsonia* is its influence over the inhibitory centres. Females, while suffering from the menopause, dread no other complication as they do palpitation, or cardiac palpitation. If the patient should be corpulent we give it alone.

MORE ABOUT ARBORIS PERSICAE CORTEX.

I must say I feel a little plagued after reading what Dr. Edson says about amygdalis; he has taken the wind out of my sails, but I must give my experience. Quite a number of years since a good friend in the profession called on me, and, asked me to visit one of his patients, honestly stating that he thought she would die. I went a few miles in the country to see her. She had been vomiting blood for two or three days, and, notwithstanding she had had oxalate of cerium, bismuth, pepsin, ingluvin and other good remedies, everything she swallowed would come up, so that she looked more like a corpse than a living being. I ordered them to go out and get me some of the young switches of the last year's growth from the peach tree; I had them pound them, to loosen the bark; I then nearly filled a tumbler with this bark, then covered it with water. I ordered her a teaspoonful to be taken after each time she vomited, one dose being given then, and one every hour after the vomiting stopped. The result was, she vomited no more and made a good recovery.

After this I always prepared a tincture from the bark of the young shoots. The dose is about the same as Dr. Edson gives, from 5 to 10 drops. I have on some occasions advised the patient to precede the treatment by taking a large drink of warm water to wash out the stomach. In recent cases I have very rarely had to give the second prescription to relieve morning sickness. I was visiting a doctor in Quincy; while there he told me he was afraid he would have either to make a lady abort or let her die, from the fact that he had failed to stop her vomiting. I happened to have a sample of the medicine with me; I gave it to him, he took it to the lady and in a few days he reported her well. I may say like Dr. Edson, it is a standard remedy with me. I have found it very useful in hemorrhage from the bladder. Some of my lady patients find it very good in nervous headache. I have used the tincture prepared from the leaves, but it is far inferior to that prepared from the bark of the young shoots. A medical friend was going to see a lady who had morning sickness; he told me he had thought of advising her to use popcorn; I handed him a small bottle of my amygdalis and told him to take a couple of ears of corn in his pocket and try both. The next time I met him he said my medicine had done the work.—Dr. Kirkpatrick in *Chicago Medical Times*. See RECORDER, July, 1890.

Homœopathic Recorder.

PUBLISHED BI-MONTHLY BY

BOERICKE & TAFEL,

1011 Arch Street, Philadelphia, Pa.

9 North Queen Street, Lancaster, Pa.

SUBSCRIPTION, $1.00 PER ANNUM.

Address communications, books, etc., for the Editor to E. P. Anshutz, P. O. Box 921, Philadelphia, Pa.

"AT the meeting of the French Academy of medicine, Feb. 18, 1890, Dr. Dujardin-Beaumetz led their attention to a work of Dr. Valude, where he praises the antipaludal action of this plant in cases where Quinine and Arsenic had failed. The botany of this shrub was studied by Prof. Yaillon, who classified it as Calliandra Houstoni and the chemical studies of its root by Prof. Villejean, who found among the coarse material an essential oil, a resinoid soluble in alcohol, a large proportion of a particular tannin similar to that of Ratanhia and an uncrystallizable matter but no alkaloid. Chapoteaut detected the presence of another tannin, the first precipitating greenish by the salts of iron, the second one bluish. A watery decoction of the root of this shrub and a tincture made with 60% alcohol has been tried with great success.

Dr. Froain reports: the bottle of Pambotano which you sent me, acted splendidly. A laborer of 52 years, suffering from intermittens, took for several months Quinine and Arsenic without the least benefit. He received the tincture of *Pambotano* and after taking it for two days he was able to return to his work. Two months have passed without a relapse, he feels strong and well. A military surgeon at Versailles reports: B., soldier in the foreign legion caught the paludal fever at Tonkiu and suffered from it for over two years and is therefore sent home. He looks yellow, emaciated, without strength when he entered the military hospital and received a decoction of seventy grammes of the root of Pambotano in four doses, every four hours a dose, each an hour before meal or three hours after the meals. A week afterwards his appetite had returned, the distressing hue of his face changed to a natural color, he felt his strength returning and could soon be allowed to be about again. Dr. Poirson reports similar favorable results and considers it more precious than Quinine as being more reliable in its results." *Bulletin Med.*, 60, '90.

The foregoing translation was made by Dr. S. Lilienthal, and sent to Mr. A. J. Tafel, with the suggestion that some of the remedy be imported, as it might be useful to have a proving made of it. Messrs. Boericke & Tafel have received a supply of the remedy.*

The remedy is much used by the people of Mexico and countries south of it. French authorities say: *Son action est surtout éclatante dans les cas invétérés où les sels de quinine sont restés sans effet.*

Among clinical cases cited are the following: An old man of 73, debilitated by the fever, and stomach ruined by quinine was cured by this remedy.

A man aged 28 returned from Panama to Paris, profoundly debilitated by the fever of that unhealthy place, which no treatment or change of air affected, was cured with one dose of *Pambotano*.

A resident of Cayenne, suffering for six years with fever, which no medicine, change of air or even "saison de Vichy" could alleviate, found a cure in this remedy.

The foregoing cases are given for what they are worth, but as the remedy is a "popular" one in tropical countries there must be something of value in it. The pamphlet from which we take the foregoing, also, says that the remedy is useful in all complaints, originating in marshy countries—"les pays palustres."

IN the November, 1890, RECORDER a paper was published on the application of medicinal peroxide of hydrogen, and credited to "the chemist Bene." Mr. Charles Marchand, manufacturer of Marchand's Peroxide of Hydrogen, writes us that while we quoted Bene correctly, nevertheless the matter in Bene's paper is simply a re-wording, and often not that, of matter of which Mr. Marchand is the author. THE RECORDER wishes always to give each writer proper credit, hence this note. As will be seen in Mr. Marchand's card on the inside of the last cover page of THE RECORDER he offers a book on the uses of this medicinal agent free to any physician writing for it.

ACCORDING to our custom subscription blanks are put into all the copies of this number of THE RECORDER by the binder. Those who have already paid for Vol. VI hold receipts and are not called upon to take any notice of these blanks. To those who have not they are a mild reminder. To those who receive a specimen copy they are a suggestion which, it is hoped, will be acted upon. THE RECORDER is only $1.00 a year and is worth the money.

---

*The price is $1.00 an ounce for the tincture.

THE
HOMŒOPATHIC RECORDER.

VOL. VI. PHILADELPHIA AND LANCASTER, MARCH, 1891. NO. 2.

ERYTHROXYLON COCA AND SOME OF ITS CLINICAL THERAPEUTIC USES.

CASE II.—In August, 1885, a milkman consulted me about the ailments of his wife aged about 25. When I saw the patient, the husband gave the following history of his wife's case. On the 3d of July, 1885, she had given birth to a son. The labor had been rather a tedious one, lasting over a period of 72 hours. On the 30th of July, that is on the 28th day of the child-birth, she felt a kind of tickling sensation about the vagina, which excited sexual desire day and night to the great annoyance of the patient. The lochial discharges during these days were usual, both with regard to quantity and quality. An Allopathic physician had been consulted, who, suspecting the presence of small thread worms in the rectum, had prescribed a purgative, and santonine and turpentine. This did not lessen the troubles of the patient. On the contrary, they increased to such a degree as to drive the patient to madness. On the 35th day of the child-birth, I was called to see the patient. When taking a history of the case, I was informed that from the 28th day the sexual desire was so much excited that she did not like that her husband should leave her bed even for a minute, on account of which the husband was quite frightened. The superstitious women in the neighborhood all believed that it was a case of *spiritual affection* by which they meant that some *ghost* must have come on the shoulders of the patient and induced the disease. The patient looked very lean and thin when I saw her, although she was as I was told, very stout and strong before child-birth. Although so lean and thin, she had strong inclination to hard bodily work and she did it without fatigue or exhaustion and at the same time she felt no desire for any food. She felt all well when engaged in some work; but when not so engaged, she felt a strong sexual desire and wanted the company of her husband, and if the husband was not present at the moment, she struck

her head with anything that came in her way and talked like a mad-woman, and as soon as she got her husband's company, all this madness went off. From the 28th to the 35th day of child-birth, she enjoyed the company of her husband almost every two hours, without feeling any kind of pain, uneasiness or disgust, though her husband felt quite disgusted and became so weak and emaciated, that he looked like an anæmic malaria stricken patient although before this he was a very stout and strong man. All these circumstances led me to the conclusion that the woman's case was one of *Nymphomania*. With sexual excitement, there were much burning and scalding during micturition, with membranes like sediments in the urine, with emission of hot burning urine *by drops*. This burning and scalding went off or were much relieved as soon as the sexual desire was gratified. The urinary difficulties she never had before. I prescribed Cantharis 3x, three doses, every two hours. After the administration of the third dose, all the urinary difficulties disappeared, but the medicine made no impression upon the *Nymphomania*. A midwife was called and an internal examination was made through the vagina upon which a very hard clot of blood was discovered blocking up the passage of the os-uter. The clot was syringed out by means of tepid water. After the expulsion of the clot there was no sexual desire for six hours, after which the desire for sexual intercourse commenced again with greater force. I was called to see the patient. She looked like a mad-woman, with staring and glaring red eyes, licking her lips as if she had great thirst and dryness of mouth and lips. Now she complained of a pain in the right ovarian region, and hæmorrhage commenced, and with the hæmorrhage desire for sexual intercourse became so strong that notwithstanding my remonstrances against joining her husband's company, she did so, and, as soon as her sexual desire was gratified, hæmorrhage stopped to my great surprise and that of the husband. Two hours after this I was informed that the patient was ashamed of what she did and asked for a medicine to remove that "beastly" sensation and desire which caused so much annoyance to herself and to her husband. I prescribed again Cantharis 3x, three doses daily. After three doses had been taken, Nymphomania and symptoms of urinary difficulties were materially relieved. Cantharis 3x was taken for three days and the patient remained well for four days. On the fifth day at 2 A.M. she dreamt as if she was enjoying the pleasure of her husband's company which roused her from sleep and profuse hæmorrhage commenced, and with the hæmorrhage Nymphomania and urinary difficulties reappeared. I was called

to see her. When I saw her at 3 A.M. I found as if she had lost all control over herself and embraced her husband in such a way that I felt great delicacy in entering the room in which she was. But "duty was duty," and, on this consideration, I entered the room. The poor woman did not give up the embrace of her husband although she saw that I entered her room, but remained firm, as if no other person than she and her husband was present in the room. After her sexual desire was gratified, she saw that I was in the room, and she gave up the embrace of her husband and commenced crying aloud and said that she was "worse than a beast." When I asked her about her complaints, she commenced answering my questions with an introduction that she considered a physician a father and that I should pardon her if she had done anything during fits of temporary insanity which went against the modesty of womankind. She commenced the history of her disease by saying that she was married at the age of 12. Three days after her marriage her husband had sexual intercourse with her *against her will* which was followed by profuse hæmorrhage from uterus. The hæmorrhage was checked by a *quack medicine* in an hour or so. Since then her husband had sexual intercourse with her every day *more than once*. She menstruated regularly every month since then. In the 14th year of her age she first conceived and gave birth to a son at the ninth month. Two months after child-birth she conceived and miscarried on the fourth month. Three months after abortion she again conceived. On the fourth month she miscarried again. Two months after abortion she again conceived and again miscarried on the fourth month, after which for two years she did not conceive, but her menstruation was very regular. At her 18th year she conceived again and gave birth to another son at the tenth month. About eighteen months after this child's birth, she did not menstruate, after which she menstruated and conceived after the first menstruation. This time also she gave birth to a son at the tenth month. For two years she did not menstruate, nor conceive, but her general health was very good. She again conceived and gave birth to another son (the present one). She also said that after every child-birth and abortion her sexual desire was very much excited and she adduced Nymphomania as the cause of her conceptions and abortions so often. The last but one labor had been rather a *tedious one* and had been attended with rupture of the perineum and followed by puerperal mania which had been cured by a *quack medicine*. During the mania the patient had always expressed her desire for widowhood and wanted to kill her husband and the newly-born

child. This mania had lasted for two months or so after which she had again Nymphomania and urinary difficulties, as before. As has already been said, the last labor was also a tedious one.

I again prescribed Cantharis 3x, a dose every three hours. After three doses were taken, the urinary difficulties disappeared, but the Nymphomania remained *intact*. I prescribed Phosphorus 6, three doses daily. Nine doses of Phosphorus 6 did no good. I prescribed Phosphorus 12, three doses daily, for three days. Nine doses of Phosphorus 12 also did no good. I prescribed Phosphorus 30, three doses daily, for three days. This also did no good. I then prescribed Phosphorus 200, a dose every other day for a week. This also did the patient no good. I gave up Phosphorus in disgust, and gave no medicine for three days, and the patient felt somewhat better, but the Nymphomania did not leave her entirely. This state of things continued for a week more. I was really in difficulty for finding out a suitable remedy for this condition of the patient's health. Now remembering the very remote symptoms which Coca had the power of inducing in the female sexual sphere, and remembering the marked power of sexual endurance even after childbirth, and repeated abortions which the woman had displayed, as also the very striking cure of the young man's case as shown in Case I, I was tempted to prescribe Coca in this woman's case. Then I prescribed Coca θ in one-drop doses, three such doses being given daily. After the administration of three doses, the Nymphomania almost disappeared. I saw the patient the next day again, when I noticed that her eyes were not so wild looking as before. She was rather ashamed of looking at my face. On my asking her as to what complaints she had, she felt quite ashamed to answer me directly. It ought to be mentioned here that before this she told me directly everything which, consistently with modesty, no woman could express to an outsider, especially a man. Now she answered every question of mine in a whispering tone of voice through her husband, and said that she had not much desire for her husband's company, but she felt *occasionally* an itching in the vagina, which gave her trouble and excited sexual desire; but the desire she felt now was, by no means, as strong as before. I again prescribed Coca θ as before for a week. On the 8th day the husband of the patient came and reported to me that his wife was *all right*. She felt no itching in the vagina, nor any excitement of her sexual desire. She felt hungry, and her appetite was good, but she felt very weak. I stopped the medicine and prescribed cod-liver oil, 5 drops at noon, and 5 drops at night, after

meals. After two weeks the husband came and told me that his wife was all right, but she was still very weak. I ordered the continuance of the cod-liver oil at least for six months. Since then she had no Nymphomania although she had two more children and two more abortions after the cure of her Nymphomania with Coca. Last week her husband consulted me in connection with the illness of one of his sons when he said that his wife had been doing well since I treated her last. Yesterday I went to see the sick child of the patient, and I could not persuade myself to believe that the mother of the child was the same waman who forms the subject matter of this article when I saw her this time.

Now, seeing the very good results which I got in these two cases from the use of Coca, I tried it with decided success in four cases of Nymphomania, in one after child-birth, in two during the menses, with symptoms of urinary difficulties such as we notice in cases of Cystitis, and in a case of Nymphomania which would come as soon as there was itching in a patch of dry variety of Chronic Eczema affecting the left Labia Majora of a barren woman of 35, of very stout constitution. In this case the patch of Eczema also disappeared along with the Nymphomania. In no case I was required to administer more than 21 one drop-doses of the mother tincture. I also tried it in about 8 cases of "wetting the bed" of children who looked very sprightly and always active about their play, without rest, and at the same time without feeling any fatigue, and in no case was I required to prescribe more than 3 ½-drop doses of the mother tincture. I tried it in three cases of Diabetes Mellitus in all of which the quantity of urine and the quantity of sugar contained therein were appreciably diminished in two weeks' time, though I do not think that the disease was cured. I also treated about 10 cases of affections of young men, victims of various kinds of ailments resulting from the *vicious and ruinous practice of "self-abuse,"* and I may say with decided success. I treated these cases in the course of the last one year. I have still under my treatment a few cases of ailments resulting from self-abuse and sexual excesses of some young men in which I have been giving Coca a patient and persevering trial, and I hope to communicate the results if they appear to me to be satisfactory.

From a study of these cases I have naturally been led to the following conclusions: (1) that palpitation of the heart, with difficulty of breathing while ascending any height, from *nervous clauses*, especially from self-abuse, is very much amenable to Coca, although we find in the so-called pathogenesis of the drug "great lightness while climbing up a mountain without any

respiratory trouble;" (2) that complaints from self-abuse and sexual excesses are very much benefited by Coca; (3) that it diminishes the abnormal quantity of urine containing sugar, though like other medicines it does not cure, but keeps the disease *at bay;* (4) that it is very useful in cases of "wetting the bed" of children from nervous causes; (5) that it is a very useful medicine for *Nymphomania* after child-birth, during the menses, and from the irritation of Eczema or other affections affecting the Pudenda of women and *Satyriasis* of men from *self-abuse* or sexual excesses; (6) that Coca acts better in *material doses*, that is in the mother tincture, than in the potentised ones. I think Coca may help us in the treatment of the incipient stage of Phthisis also.

R. K. GHOSH.

70 | 1 Mániktalá Street, Calcutta, October 29th, 1890.

HAHNEMANN vs. COMMITTEEMAN.

A paper, under the title, "Some of the Effects of Trituration," was published in the November number of *The Medical Current*, the writer being a pharmacist and patentee of the machine used in the experiments. The paper would call for no comment but for the fact that the writer is also a member of the Committee of International Pharmacopœia, and that it is apparently designed as a basis for that work in the matter of triturating. If this surmise be correct it will be well for the committee to consider the matter very carefully, for the paper seems to contain some conclusions that chemists might regard with a smile. *Zincum metallicum*, under prolonged trituration, is said first to become darker, then lighter, and finally white. This is "due to oxidation." *Argentum*, on the other hand, is said to become "so dark that the IX trituration is nearly black," and "this change of shade is not due to oxidation," for the metallic particles, "freed from milk-sugar by the solution of the latter in distilled water, may be illuminated by condensing a beam of sunlight, by means of a lens, on the liquid in which they are suspended, so that they appear as individual particles, glistening like stars. By this means it is possible to see, without amplification, particles one-forty-thousandth of an inch in diameter, and no one knows how much smaller."

While this test may be very satisfactory to minds so constituted as to regard it in that manner, it is not of such a nature as to have any weight or place in a pharmacopœia. The assertion that a black IX trituration of *argentum* is "not caused by oxidation," but by grinding alone is, we think, rather too fanciful for

serious chemical science. Milk-sugar triturated 1,000 hours remains perfectly white, as the same authority informs us; the particles of *argentum*, or silver, triturated 200 hours are not oxidized, but glisten "like stars;" now, the question is: "How can a pure white substance mixed with a silver bright one be "nearly black?"

But the most important point in the paper, and one which, if accepted by the committee and the medical profession, means revolution, is suggested throughout the paper and stated in the following, which as a formula halts a little at the end: "The Hahnemannian period of trituation is vastly insufficient for thorough drug-subdivision, at least in the 1x and 2x." True it is. True also that "200H" (as the "new sign" has it,) is "vastly insufficient," even with "33 pestles" working high pressure on a quantity of material "sufficient to 'feed' the pestles, but not so great as to be thrown out by the movements of the apparatus;" (what a change from the time when it was a "degradation" of pharmacy to triturate more than 100 grains at a time) even "200H" is "vastly insufficient for thorough drug-subdivision." Where does subdivision end? A wise writer of another day has said, "matter is divisible to infinity." Does this gentleman of the present day suppose that Hahnemann regarded his triturations, *with which his provings were made and on which the whole of applied Homœopathy rests*, as incapable of further subdivision? From an old, time-stained pamphlet, written in 1833, when the word "Homœopathy" was almost unknown in this country, the following is quoted: "With still greater clearness was this established by the important fact observed by Hahnemann, viz., that when the process of Trituration or Agitation was too long continued, the energy of the medicine became too intensely raised, and he, therefore, exactly prescribes how long the trituration with sugar of milk is to be continued." The pamphlet was written by Constantin Hering. On Hahnemannian triturations were Homœopathy's greatest laurels won.

"200H" or, for that matter, "2,000H" triturations could be supplied by any well equipped house, but such triturations *are not Hahnemannian* and *are not* the triturations which produced the symptoms guiding the physician at the bedside; they are only unproved substances; indeed, it may be said they are *unknown* substances, for who knows what may be the effect on certain drugs of weeks of grinding and exposure to the air? 200 H means an exposure of fully three weeks, unless the machine works day and night and Sundays.

It is for the gentlemen who are called upon to administer the medicines to decide.

ELEPHANTIASIS ARABUM.

On November 21, 1890, I was called to see an elderly lady, about sixty-five years of age, and short in stature, five feet. She was blessed with a cheerful and hopeful disposition, bearing up bravely, and making the best of all her troubles, while she was compelled to drag around this very large limb. She has been afflicted by it now for nearly four years.

The first sight of it was to me a very remarkable one, the great size was eclipsed by its shining appearance. The crevices or folds caused by the great weight of the upper upon the lower parts were of a burnish silvery whiteness throughout the whole length of the limb. When rubbed it was hard and dry, and large scales, as like fish scales as possible in shape or more like pieces of pearl shell, for some were thicker than fish scales, would fall off. On the under or back of the limb were hard rough nodules or elevations, as large as little neck clams, rough and hard.

The size of the limb at the first measurement was: Around the ankle, seventeen inches and a half; the calf nineteen inches and a half; the knee, twenty-two inches. Three inches above the knee, twenty-two and one-half inches, and the upper part of thigh, twenty-four inches.

The lady comes from a long-lifed race of ancestry, some of whom lived beyond their hundred years; her mother to over ninety.

History.—The probable cause of the trouble is as follows: About five or six years ago she was a Sunday-school teacher in a mission school. There being a fear of small-pox in the school, she consented for the sake of the family she lived with to be vaccinated by their family physician. He remarked, immediately after, that the vaccine should take as it was good, having just been taken from a little negro baby. This information gave her somewhat of a shock. She had a fearfully swollen ulcerated wound with erysipelas condition, and it was a very long time before she recovered, or rather, appeared to do so. About one year after this she fell on an icy pavement, and hurt her knee very much. Shortly after this she noticed a swelling of the knee and lower limb, which kept on increasing in size and hardness, notwithstanding the efforts of several physicians to arrest the growth and cure the difficulty.

The great size and weight of the limb had almost made her a house prisoner. She attempted to wash, but found she could not lift the limb from the floor. The leg affected is the right

one. When I first saw her, the left leg was also very much swollen, ankle measurement being thirteen and the calf fifteen inches in circumference. But this edematous swelling was watery or doughy. By pressure, you could almost bury your fingers, and leaving their imprint for some time afterwards.

The marks of contrast were great. The right leg was as hard as wood. You could make no impression on it whatever, and there was very little feeling caused by a very hard pinch. It had a shining white silvery appearance. The left leg was soft, compressable and tender. There was also an itching sensation, and it was of a pinkish hue. The two limbs made a good diagnostic contrast, and prevented any mistake in the above diagnosis.

There was also a very constipated condition, there being only about three movements per month. If weekly, she would think she was doing well. There was also some giddiness of the head, causing a tendency to fall backward. These two symptoms suggested *Graphites* as a remedy, which I gave. Five grains in half a glass of water, of which she was to take a teaspoonful every two hours for two days. On the 24th of November I found all the symptoms better, and there was a decrease in size of nearly two inches in the limb. It was at this visit that I took the measurement of the other, or left leg, below the knee. This improvement was more than I expected so soon. Keeping in mind the (school) advice not to change a well-doing prescription, I continued *Graphites*, giving about the fourth of a dram of the Dec. Trit. in a tumbler of water, to be taken every [two hours, as at the first prescription. On November 26th there was a general improvement, and bowels moving easily every third day. Legs decreasing in size, and becoming soft and smooth, the scales disappearing.

The limb continued gradually to decrease up to December 17th, 1890, when I bound it with a broad rubber bandage, from the foot up to the body. She then remained in bed with the most gratifying result. I continued Graph. 1st. On December 20th, 1890, the measurements were: Ankle, nine and one-half inches; calf, sixteen inches; knee, fourteen and one-half inches; above the knee, fifteen and one-half inches; and thigh, seventeen inches. The left leg, the dropsy leg, had entirely recovered, except some thick skin on the back of the limb, which made me think that this leg would, in all probability, have soon become as bad as the right one.

This made a reduction in a month of seven inches at the ankle and upper part of thigh, and of five and six inches at the two other measurements. At this time Dr. T. Helmuth very kindly

informed me of his remedy, *Hydrocotyle*, and I gave a one-drop dose every three hours for one week. Under this medicine I lost ground, there being an increase in the limb of one and a half inches in each measurement. Having found this Asiatic medicine to be unsuccessful I then tried the highly recommended medicine *Thuja* for a week, with no better results. I then gave *Sulph.* for three days, to tone up the system, and returned to *Graphites* 1, D. Trit., and am very happy to say at this writing that my patient is in every way better, both in looks and in her ability to get about and do some light work in her room. Ankle measurement, in both limbs, is now eight inches; calf, thirteen inches; knee, fourteen inches; and thigh, sixteen and seventeen inches. Skin smooth, but dry and wrinkled. When she is standing upright the skin and tissues hang in folds like an empty bag, and I fear would soon fill up again if not kept tight to the bone by bandages. I shall endeavor to have this superfluous skin or flesh contracted or absorbed in some way. I am now trying to get a good perspiration or moisture on the limb surface by Borax baths, and am also trying Rhus. T., at the kind suggestion of Dr. Helmuth.

I described this case to our skillful Professor of Dermatology, Dr. Archelarins, who gave it the name I have already done, thus confirming my diagnosis.

This is the third case of this kind that I have ever seen. One, an old man of eighty years, with large lumps on various parts of his body and limbs, rough and hard. He died at the age of eighty-two without any change. He went to sleep under Morphine treatment, but not in my hands. The second case was that of a young woman, who came from Rhode Island, before Dr. Helmuth's clinic last year, with one or both legs of an enormous size, and to whom the learned Professor prescribed Hydrocotyle.

There is a case photographed in Dr. Fox's book on Skin Diseases. A case reported by Dr. Charles Jewett, of Brooklyn, notes furnished by Dr. P. L. Schenck, of the Kings County Hospital. This was in many respects similar to the one that came before Dr. Helmuth's clinic, being young, only nineteen years of age. My case differs from the general description, being white and shining, instead, as is usual, of being dark and discolored, brownish or tannned.

ROBERT BOOCOCK, M. D.
Flatbush, N. Y.

POTHOS FŒTIDA.

November 6, 1889, was called in haste to see Miss N———, aged 19 years. Found her lying upon the floor, exhibiting all the phenomena of epilepsy, clenched hands, frothing at the mouth, clonic spasm, etc.

On questioning the family, I learned that she had been subject to such seizures for about two years, and that they were increasing in frequency. She had been dismissed from the various cotton mills in which she had been employed because of them. The father had been informed that she had epilepsy, and she had been treated accordingly by three Old School physicians.

The sister informed me that athough she had frequently fallen near the stove she had never struck it. Further questioning elicited the fact of her never having injured herself more seriously than to bite her tongue. It was then I became suspicious, and later felt convinced that it was hysteria and not epilepsy with which I had to deal.

I remembered having read in THE RECORDER an article by Dr. S. A. Jones, of Ann Arbor, on *Pothos Fœtida* with the record of a case in some respects similar to mine. After again reading it up, I made a tincture of the roots and tendrils gathered at the time, of which I gave her a two drachm phial directing her to take ten drops three times per day.

On the second day she had a slight seizure while at dinner. After two months she again resumed her place in the mill where she has since been steadily employed, and is strong and well in every way.

Have used *Pothos* in epilepsy, also in dropsy with negative results.

W. M. CAMPBELL, M. D.

Cohoes, N. Y.

THE DIFFERENCE OF ACTION IN DIFFERENT POTENCIES.

In Homœopathy the question of potency is a very important subject. Both high and low potencies are equally recommended. Everyone ploughs his field according to his own observation. The difficulty is much felt by the novices. To remove this difficulty Dr. C. S. Kali, of Palena, is trying his best to collect the observations of the eminent Homœopathic physicians of the world in respect to the different attenuations of the medicines used by

them. Drs. S. Lilienthal, J. R. Kippax, T. S. Hoyne and others favored him with their experiences. Every physician to whom he sent his appeal should co-operate with him in solving this difficult problem of Homœopathy.

Every one of our school acknowledges the difference of power between high and low potencies. But it is not less astonishing to see the difference of action even between first and third potencies. I send herewith a few cases from my practice to show this difference.

Case 1. Babu Girindraneth Saha was attacked with colic and vomiting. I was called in the morning. The umblical region I found very hard to touch, pain very intense, driving the patient almost mad, and frequent vomiting of green masses. The majority of symptoms led me to select Aconite, and I prescribed it in the 3x potency at every half an hour. But there seemed to be no improvement at all; after full three hours' trial I changed it for other similar remedies. But there was still no improvement. Dr. C. S. Kali, of Palena, was then consulted. He, after examining the case, selected Aconite, and urged to try it once more in the 1x potency. Accordingly, Aconite 1x was given. To my great astonishment within half an hour the patient was much relieved; another dose completed the cure.

Case 2. A boy of five years of age is attacked with hæmaturia. I prescribed Aconite 3x and Hamamelis 3x alternately. Next day I saw the patient, who, instead of getting better seemed to be much worse. The desire to micturate was very frequent, amounting to thirty times a day. But with a few drops of urine nearly quarter of an ounce of blood was passed every time. The patient was much prostrated and passed sleepless night. I changed the attenuation and prescribed Aconite and Hamamelis 1x dil. in alternation. Next day I saw the patient much better; much less blood in urine, and within 48 hours, the patient was fully recovered.

Case 3. Babu ——— Saha got fever in the month of September last. In the morning he felt much pain in his limbs, which was followed by chills and violent fever. Thirst was extreme, followed by vomiting of bile. I examined the case and prescribed Eupatorium perf. 1x in every two hours. Next day I saw the patient; though the fever was then little less, yet there was no amelioration of other symptoms. At 11 o'clock chill commenced again, followed by increase of fever. Thirst was very frequent, and every time drinking caused nausea and vomiting of bile. I prescribed again Eupatorium perf., in 3x potency. To my great satisfaction two or three doses relieved the patient much. Thirst

and vomiting gradually diminished. Next day I saw the patient all right; no fever, no unneasiness, except weakness and a little pain in the throat, which was caused by the incessant vomiting. There was no relapse again.

KUNJA LAL SAHA.

Hom. practitioner, Dogachi Palena, Bengal.

REVISION OF THE MATERIA MEDICA.

BY O. EDWARD JANNEY, M. D., OF BALTIMORE.

(Concluded from Vol. VI, page 28.)

PRINCIPLE I. *All work must be based on original provings or copies of the day books of provers.*

The scientific work of the present is done with original material. Students do not now take commentaries or the arrangement of a second party, as authority, but make it a rule to obtain originals to work with, as far as it is possible to obtain them. And this is true in every field of scientific research. The student of biology watches for himself the development of the fœtal chick from day to day, and the student of history searches the musty records for originals on which to found deductions or reviews. What men want now is *to know the truth*, and they care less now than ever before, that truth interferes with preconceived ideas. Men want the truth, no matter what the result may be. And, therefore, it becomes essential that all work to be valuable and lasting must have truth for a foundation, and hence has arisen the demand for original material in all scientific work.

And if this is true of such work in general, it is eminently so of medical research, and especially in the field of Materia Medica, which is our armamentaria for curing the sick.

In an effort, then, to revise our Materia Medica, with an aim to reach scientific accuracy, it becomes necessary to have access to the day books of provers or certified copies of them.

When symptoms are torn from their proper relations, and cast into a "schema," much is lost that should be known.

Many of those delicate shades of difference which distinguish one remedy from another are lost, because the relationship is broken up and symptoms that serve to explain each other are fixed in widely separated parts of the schema. As an illustration of this point take the following symptom occurring in the course of a proving of Cuprum Aceticum, as recorded in the day book: "Brought into the hospital he was delirious, had weakness and convulsions, limbs and body stiff, jaws closed." This group of

symptoms, placed in their proper relations, gives a fair idea of the prover's condition but when the symptoms are placed in a schema, they could be found only by searching under no less than four of its divisions, *i. e.*, Generalities, Mind, Limbs and Face, and there would be no means of knowing that these symptoms occurred simultaneously, or bore any relation to one another. Therefore, while it is convenient for many reasons to have the Materia Medica arranged in schema form, yet it is not the ideal way, and in order that a correct knowledge of the true action of a drug may be obtained—especially the general sphere of action, and the sequence of symptoms, so far as the latter is practicable—the daily record of each prover must be studied.

Again, not only is it necessary to work with the prover's record for the above reasons; but, also, that something may be known about the prover himself, his physical condition previous to the proving and during its continuance, whether he faithfully carried out his work, whether he used alcohol or narcotics, any variations in the doses taken, and the preparations of the drug used. All of these are points necessary to be known to those who would revise our Materia Medica. Such, then, is the value of the original provings, and such their necessity in this work. Where are they to be obtained?

Carefully printed copies of the provings of many substances may be found scattered throughout the literature of our school, but, fortunately for the student of Materia Medica, the work of collecting these into compact form has been performed by Drs. Dake and Hughes, and in the *Cyclopædia of Drug Pathogenesy* we possess a great mass of material in excellent form for this work of revision, and to this everyone may have access.

"The *Cyclopædia of Drug Pathogenesy*, without doubt the first and prime essential of a complete materia medica, is the mine out of which must be dug the materials of all future materia medicas; and, unless this has been taken as the foundation, no treatise on Materia Medica should in future be considered worthy of acceptance."—(Dr. Hayward, "The Materia Medica of the Future," N. A. Journal of Homœopathy, September, 1889.)

As an illustration of the value of the original record in the revision of the materia medica, turn to the article on Chromium in the *Cyclopædia of Drug Pathogenesy*. Here are given in full the effects of the drug upon twelve workers in bichromate of potash, while in other works of reference the effects upon all these persons are commingled and given under one head, inseparable. When it is considered that the *number* of persons who prove a drug is a very important element in revision work, the significance of having complete records is clearly seen.

PRINCIPLE II. *No proving shall be made use of when the preparation of the drug has been diluted above the 12th decimal.*

In adopting this rule it is not intended to assert that higher dilutions do not produce symptoms—the question of potency is not entered upon, but left to the test of experience and scientific research. It is evident, however, that there must be a fixed point of drug dilution beyond which no provings will be made use of, if only for practical reasons, leaving theoretical matters out of the question. It is an impossible task, if it were a wise one, to revise the Materia Medica on the present lines, if all provings be accepted. It has been deemed necessary, then, to fix such a point at the 12th decimal dilution, and, while this action may be deemed arbitrary, it it yet reasonable, for, while it takes in all the lower preparations, it also reaches well up towards the higher.*

Remember that the limit was decided upon by a vote of the American Institute of Homœopathy, in the discussion preceding the publication of the *Cyclopædia*, and has been carried out by the editors. Those, therefore, who are now working in the line of Materia Medica revision in accordance with the above principle are only carrying out the rule adopted by the representatives of a majority of the physicians of our school.

"Well," says Dr. Richard Hughes, "I do not disclaim any proving above the 12th (dec.), but my feeling is that a line of separation here would be best received by the profession in England, and I was assured that it is the same in this country. Those who believe in the efficacy of high potencies can still receive and study the effects of drugs in more tangible form, which are acceptable to the vast majority of our school, and I think that more harm would be done by offending these than by disappointing those."†

The present method of revision claims to be a scientific one; as said above, scientific work must have that which is certain for a foundation; all are agreed that positive symptoms may be obtained from preparations of a drug as far as the 12th decimal; many claim that above this point drugs cannot be relied upon to produce symptoms in the healthy; therefore it follows, logically, that a proving made with an attenuation above the 12th decimal, not being acknowledged truth, cannot properly be used as a basis for a scientific revision of the Materia Medica.

It has been claimed by some, that inasmuch as no symptom is

---

*The adoption of the rule was absolutely necessary for the preparation of such a work as the *Cyclopædia of Drug Pathogenesy*.

†Transactions American Institute of Homœopathy, 1884.

retained in the completed work unless a certain proportion of the provers experienced it, therefore any false symptom, not having been noted by the proportion of provers agreed upon, would be dropped.

This claim, while specious, is misleading, for the reason that every drug prover records a variable number of symptoms not due to the drug, which, in the absence of a preliminary health record, cannot be separated from those caused by the drug, and will often reach the proportion necessary to be placed in the final synthesis. While there are a few persons with such delicate organism as to be affected by the higher attenuations (above the 12th dec.), yet it is very probable that provings made with these preparations, without regard to such susceptibilities, will consist chiefly of false symptoms.

The result of using such provings, then, will be the retention of a vast mass of false symptoms in the completed Materia Medica. By adhering to the limit set, however, while some valuable symptoms may possibly be omitted for the present, or rather await verification, yet what is retained is true and reliable.

This is *the* important point in Materia Medica revision; that every symptom finally recorded shall have been put to such tests that no reasonable doubt shall exist as to its valus and genuineness. It therefore seems wise that revision work shall be governed by the rule adopted by the American Institute, and followed by Drs. Dake and Hughes in their *Cyclopædia*, fixing the limit at the twelfth decimal preparation.

PRINCIPLE III. *Every symptom is retained which occurs in the provings of two or more persons.*

PRINCIPLE IV. *Every symptom shall have appended a figure or "exponent," showing in the provings of how many persons this symptom appeared.*

The principle reveals the central thought of Materia Medica reform, *i. e., comparison of provings and the retention of those symptoms only wherein the provers agree.*

It is hoped and believed that, by the adoption of this plan, a large number of unreliable symptoms will be dropped, and the genuine retained, since the true drug symptoms, or at least some of them, will appear in every good proving. The idea is to compare all the provings of a drug, and note how many of them contain the same symptoms. Thus by a simple but scientific method a symptomatology of a drug is built up, not containing a vast array of symptoms, but those actually produced by the drug selected.

It is an important question which at this point arises for

decision—what proportion of the provers of a drug must have produced a given symptom, that such symptom may be retained in the Materia Medica?

In answer to this, various suggestions have been offered. Twenty-five per cent. of all the provers, twenty-five per cent. of the observer's recording effects on the anatomical groups, and eight per cent. have advocates; but it is difficult for various workers to settle upon any one proportion, when the rule is not only an arbitrary one, but not found to work well in practice.

It would astonish one who has not studied this subject, to know how many symptoms now recorded in our various works on Materia Medica occur in the records of but one prover. Were these to be thrown out, the volume of the present Materia Medica would be reduced more than one-half, and if all symptoms which were experienced by only two provers be rejected, nothing will be left of the symptomatology of most substances except the barest skeleton. Take, for instance, Argentum Nitricum (see Hahnemann Monthly, December, 1889). As this pathogenesis stands, there are one hundred and forty-six symptoms recorded. Now if all those experienced by two provers only be omitted, there remain but eighty, and this drug had sixteen provers. If twenty-five per cent. of the provers—in this case four—must experience a symptom in order that it be retained, only twenty-six symptoms would remain, and those not the most characteristic.

It is evident, then, that to fix upon any particular percentage is very difficult, and therefore, it seems best to admit all symptoms experienced by *two* or more provers.

By this plan, many valuable symptoms are retained that would otherwise be put aside among those awaiting verification, *i. e.*, those experienced by but one prover.

The method does away also, with the necessity of deciding upon a percentage, since the figure affixed to each symptom (the exponent) enables the student—the number of provers being given—to perceive the percentage for himself. He is then at liberty to cast aside all symptoms that do not occur in a sufficient number of provings to reach his standard.

The figure attached to each symptom gives it an added value, gives it a character of its own, as compared with the usual custom, enabling one to see at a glance the chief effects of the remedy, and which of its symptoms are those most characteristic.

It is not supposed that no objection will be found to this plan of revision, but it seems clear that a Materia Medica built on this foundation will be of great value as far as it goes, forming

a basis for future work. Even at present it will be welcomed by earnest students of all schools of medicine, as showing the real effects of medicinal substances on the human body.

PARTHENIUM HYSTEROPHORUS.

A proving of *Parthenium Hysterophorus* by Dr. B. H. B. Sleight, of Newark, N. J., was published in the May number of THE RECORDER of the year 1886. It excited but little attention at the time, and to-day, probably, nine out of ten physicians know nothing of the remedy, for it is not mentioned in any of the text-books. It has one very marked symptom that should commend it to every practitioner and rescue it from oblivion, for the simple reason that no other remedy has the same symptoms so prominent, if at all. The marked symptom is "teeth on edge." We cannot reprint the entire proving, but the following is a sketch of it: Five drops of the tincture produced at once a full feeling in the head, pressing from within. Ringing in the ears followed; then, "upper teeth feel 'on edge.'" "Upper incisors tender at socket when biting." "Sudden pain in upper teeth." "Pain in frontal eminence has returned and continued. Teeth 'on edge' and tenderness in sockets. Upper incisors ache as after filling. Teeth feel too long." On the following day; "Same tenderness at sockets of upper incisors when biting." "Upper teeth all ache and feel too long." "Aching in lower left molars." "Teeth 'on edge.'" Again, after three days, on taking two and half drachms: "Upper incisors commence to ache. Aching and bursting pain in nose remains; nose feels swollen." "Teeth 'on edge.'" There were, of course, other symptoms, but the one noted stands out with peculiar prominence. *Parthenium Hysterophorus* is a Cuban plant.

AVENA SATIVA.

A New York physician who used *Avena Sativa* in large quantities was asked to write up his experience for the RECORDER, but "hadn't time." He gave, however, a verbal report of his experience with the remedy, and here it is.

The tincture of oats, Avena Sativa, has as its characteristic action a decided tonic effect upon the entire nervous system,

possessing likewise the properties of an opiate without any disastrous effects. It has been found to be most beneficial in cases of nervous prostration, general debility and nocturnal emissions. Given in doses of from 10 to 20 drops of the mother tincture, three or four times daily, it rarely fails to give immediate relief and frequently makes a complete cure if persevered in. In cases of prostration, resulting from sexual excess, causing weakness and sleeplessness, its use is especially recommended. In the case of a patient, who had become addicted to the excessive use of morphine, the tincture of Avena was given in small doses, which were gradually increased as the quantity of morphine consumed was correspondingly diminished, until the use of the morphine was entirely discarded and the patient kept on Avena for some weeks without experiencing any of the bad results the abrupt discontinuation of the drug would have caused. Avena was then stopped and the patient discharged cured. The use of Avena tincture can at any time be abruptly suspended without any evil consequences, even though the patient consumes as much as 120 drops a day; at the same time it possesses the quieting properties of morphine and similar drugs without the danger of contracting a "habit," necessitating its continued use.

The only aggravating symptom resulting from an overdose, that has been noted, is a dull, heavy pain in the back of the head, which disappears upon reducing or discontinuing the medicine. This symptom, however, is very rare.

Avena must be given in appreciable doses, rarely less than five drops of the mother tincture, the average dose being from 10 to 20 drops, which should be given in a little water. Hot water is to be preferred, as it seems to increase the activity of the remedy.

SOLANUM CAROLINENSE.

THE RECORDER for July, 1890 (p. 181), contained an interesting account of the popular use of the *Solanum Carolinense*, popularly known as the "horse-nettle," in the treatment of chronic epilepsy, and also of its use in practice by Dr. Napier, of Blenheim, S. C. He gave the tincture to a woman who had been epileptic all her life, especially during the menstrual flow, and no further trouble was experienced, save a threatened convulsion on the third day. Another case, that of a dwarfed, ill-formed child who had been epileptic all its life, and after an

attack of typhoid fever went into a decline, the epileptic convulsions becoming harder and frequenter, was put on the tincture of horse-nettle berries, after which there were no further convulsions. Nothing further was heard of the newcomer until Dr. W. Grebe, of Richmond, Va., wrote an account of a case treated by him to *Notes on New Remedies* (January, 1891). He writes:

"Two years ago last Christmas the first attacks appeared in patient [a boy of fourteen], at which time he was under my treatment for about six weeks; then the father was advised to engage a Homœopathic physician, who promised a cure in a short time, but gave up the case after eleven months; an Allopathic physician was then engaged, who treated the case several months and also unsuccessfully. The father brought the boy to me again, just at the time I read about the horse-nettle berries, and after getting a supply I commenced using them. Of the tincture the boy took 40 drops three times daily, and he has not only had no attacks in over nine weeks, but he is also generally improved in health; I have the greatest hope that he will be entirely cured of this terrible disease."

When it is remembered that remedies like *Hydrastis* and *Hamamelis* were long in popular use before being taken up by the medical profession it will be an argument for a proving and investigation of the popular negro remedy, *Solanum Carolinense*.

ALOES.

Dr. Jekyll, in our esteemed contemporary the *Journal of Homœopathics*, finds in *Aloes* a remedy of great use and scope: "For a long time I have considered that *Aloes* is the most valuable remedy in the whole Materia Medica with which to begin the treatment of most of the chronic diseases that come into our hands, and especially those that come from the hands of the 'regulars,' where a wholsale drugging has taken place and the symptoms are so obscured that it is impossible to separate the disease symptoms from those of the drugs that have been administered; or in those cases where the disease has been suppressed by improper doses, or by the profuse use of external applications." He illustrates the use of the remedy with three clinical cases. One was a very ill young man, who at the age of six had been "cured" of the itch by sulphur and sulphur ointment; (how about Hahnemann's "mistake" concerning the itch?) seven doses of *Aloes* brought out a fine case of itch, from head

to foot, which was then cured by *Sulphur* in high potency. The second case was one of suppressed measles, *Aloes* brought out an eruption and Pulsatilla cured. The third case was one of Allopathically cured chancroid; *Aloes* brought it out again, and *Nitric Acid* permanently cured. The Doctor concludes: "I think that these cases are sufficient to establish the value of *Aloes;* if not, I can give any number of a like character." The potency administered was the one-thousandth in each instance—seven doses in seven days, then sac-lac until the eruption appeared, which was generally within a week.

A DISCOVERY.

It was a beautiful spring day. Overhead spread a blue sky adorned with fleecy white clouds, the air was vernal, the trees and flowers full of youth's vigor, and the sunshine seemed to be the golden life of everything, bountifully flung down to all creatures alike, and all were happy, even the moss-grown rocks appeared so; all but the farmer, the observant crow thought. The farmer was dropping corn into the ground and covering it up, and the crow with an honest belief that all things of the earth were for the benefit of earth's creatures, had been helping himself freely. The crow's philosophy put into practice angered the farmer exceedingly, and he threw stones, and shouted at the crow. The latter did not mind this much, but when the farmer got out a gun he departed, the more willingly as his crop was full, and that was all he asked. He was a shrewd bird with keen eyes and a faculty of close observation. Sailing luxuriously through the air of blue and gold, observing the world beneath him, he detected a horse lying in a neglected spot. Wishing to observe a little closer, he circled around lower and lower, and finally alighted. A closer view showed him that the horse was dead. So he hopped up on the carcass and studied it. Then he made a famous discovery, and his heart swelled with pride. While in this condition a sparrow, which was taking a summer outing and bullying everything high and low, happened along, and said, "Hullo! what are you doing there, you black crow, you?"

The crow observed who spoke, and, full of the exaltation of a discoverer, replied, "I think I have made a most important discovery."

"Have you?" replied the sparrow, forgetting his bad manners in his curiosity, "What is it?"

"Do you observe those white objects crawling about on the carcass of this horse? See, there are myriads of them." Thus spake the crow when the sparrow joined him.

"Of course; them's nothing but maggots."

"Nay, my friend, they are microbes."

"Rats!" shouted the feathered hoodlum; having thus asserted his independence, he asked, "What's microbes."

"Microbes, my dear sir, are the origin or the cause of sickness, and consequently of death. At first glance it may appear as though these microbes were the result of decay or death, but this is an unscientific error, and, in the light of my researches, unworthy of credence."

"Is that so?" replied the now thoroughly subdued sparrow.

"There can, scientifically speaking, be no doubt of it," replied the crow. I have frequently noticed, and so have other observers, on the shoulders of horses 'sore spots,' as they are vulgarly called, and in these spots the same microbes, though fewer in numbers, that we observe here. Now, the deduction is obvious and conclusive. These microbe infected spots on the still living animal were to all intents the same as we see the entire animal to be at present. Now, the whole gist of the matter is this: These microbes are the cause of the disease, and if we can discover a means of destroying them we have conquered disease."

"Well, I'm blowed!" exclaimed the sparrow, lapsing into the language of his English progenitors. Then he hastened back to town and spread the discovery from the rising of the sun to the going down of the same. * * *

RHUS TOXICODENDRON.

This remedy is not a "new discovery" after all, for here is Dr. John A. Henning, in the *Medical Summary*, who has known and prescribed it for fifteen years! His indication for it is as follows: "The first leading and important indication is when the tongue is tremulous or quivering, with rose-colored bubbles of the papillæ at the tip and edges, and is nearly always elongated, with a dirty-white fur in the centre. This tongue is seen in many forms of acute diseases, either in fevers or inflammations. It is also observed in some chronic diseases." Among the ailments for which he prescribes it are the following:

"My observation leads me to conclude that Rhus is the *best*

brain and nerve stimulant and tonic in the Materia Medica. I have made some brilliant cures in congestion of the brain with this remedy when others failed. Mr. W., aged 50 years, was down with active congestion of the brain. The attending physician gave him up to die. I saw him in consultation. The tongue was tremulous, with prominent papillæ on the tip and edges. Rhus was the leading remedy. He completely recovered in a reasonable time.

"Then it is also a splendid remedy in paralysis when indicated, being a nerve stimulant. Why should it not be? It matters not what form of paralysis we have, just so it is indicated. About a year ago Mr. B., aged 40, had paraplegia, both lower limbs being useless. Rhus was indicated as the leading remedy. It effected a cure. W., aged 46, last June was suddenly paralyzed on the left side, caused by active congestion of the upper lobe of right brain, which came from being overheated. Rhus was indicated and was the leading remedy.

"Business men, brain workers, come into my office and say, 'I am played out, brain-fagged.' Here the rhus and nux will soon restore him. Ladies tell me 'I am so weak the least exertion I give out.' Insomnia, tongue tremulous, look pale, despondent. Rhus and cactus will give immediate relief. Children when teething are nervous, irritable stomach, pointed tongue, restless at night. Rhus is the remedy. It is a grand remedy. Remember, give small doses frequently repeated, and continue it until it brings the desired results. It will never disappoint you. This is my experience at the bedside."

Our Allopathic friends are to be congratulated on the progress they are making. But there are vast Homœopathic preserves as yet untouched by their gunners.

CORRESPONDENCE.

A DEFENCE OF HYPNOTISM.

EDITOR OF THE HOMŒOPATHIC RECORDER.

Your January number is just to hand—bright and fresh as ever. You give all sides fair play, from those who would improve our Materia Medica to the bulk of a pocket receipt book to those who wish it to be still further enlarged. But there is one passage in the review of Dr. Holcombe's novel,

which does not seem to be in keeping with a progressive scientific periodical at the present day. I refer to the sentence in which I think your reviewer must have written without due consideration—speaking of hypnotism. "Our opinion (perhaps out of place in a book notice), is, that the power must be an evil one at all times—the utter loss of free-will and rationality, and the substitution of another's will is, while it lasts, far worse than bodily slavery." If the writer had given any thought to the matter he would have seen that the mental slavery, which seems to make him shudder, is just what exists at the present time to a great degree, and always has existed. Under an autocratic government is not an entire nation swayed by the will of one man? Is not an army controlled by the will of the commander? It is only a small proportion of mankind that has the privilege of thinking for themselves, and to a limited degree, exercising their own will. Most of us are very considerably controlled by the force of "Public opinion." Our education is based on the effect of hypnotic "suggestion" or assertion by our teachers. As school children, or students, we believe, the assertions of our instructors, and continue to believe them until, in many cases, experience or further scientific discovery convinces us that we have been believing, all these years, that which is not true. In religion it is the same; from infancy up we are taught to implicitly believe the original snake and fish stories, and to attribute to a merciful and loving Creator such horrible doctrines as Divine *wrath*, *everlasting* punishment and *infant* damnation. Many pass through life without gaining freedom in this respect. What freedom has a devout Roman Catholic in religious matters?

Again, who are the successful men, in a commercial sense? Men of strong will, who can control others to their own advantage; frequently men of very limited education and possessing few ideas; but all their faculties and will power are concentrated on one object—making money, and they generally succeed.

Then, as to hypnotism being "evil," because it may be put to a bad use; is not this too weak? Ether, chloroform, alcohol and all the poisons might be dubbed evil for the same reason, for they are frequently used for evil purposes; but they are all blessings when properly used, and where would Homœopathy be if there were no poisons? If hypnotism is a psychological fact, as is now generally admitted, it must be a gift of the Great Architect of the Universe, and must, therefore, be a blessing, and not a curse. The true way to prevent its possible abuse is to properly educate the people; to teach them to *think* for them-

selves, and not to merely imperfectly repeat, like so many parrots, the thoughts of others. Then they would be able to maintain such a positive state of mind as would enable them to withstand the assaults of any hypnotist who might happen to be worse than themselves. Hypnotism, as a perfect anæsthetic and reliever of suffering, has a glorious future before it. Trusting to your known sense of fairness, I hope you will publish these few lines in defence of a struggling and much-abused truth, I beg to subscribe myself.

R. BEWLEY, M. D.

Philadelphia, January 28, 1891.

THE AMERICAN INSTITUTE OF HOMŒOPATHY AND THE INTERNATIONAL HOMŒOPATHIC CONGRESS.

Secretary's Notice.

EDITOR OF THE HOMŒOPATHIC RECORDER:

The American Institute of Homœopathy will hold its forty-fourth annual session and celebrates its forty-eighth anniversary, in conjunction with the fourth quinquennial International Homœopathic Congress, at Atlantic City, New Jersey, beginning on Tuesday morning, June 16th, 1891. In accordance with action taken at its last session, the Institute will transact, as far as possible, its necessary routine business on that day, and the International Congress will assemble on the following morning. The sessions of the latter will occupy the morning and afternoon of each day (Sunday excepted) until Tuesday, June 23d. This arrangement of the business of the Institute makes it necessary that all the standing and special committees should have their reports in readiness before the opening of the session. But it should be noticed that all *scientific* reports of committees and bureaus appointed last year will be deferred until the session of 1892, thus giving place to the scientific work of the Congress.

All members of Homœopathic medical societies will have equal rights as members of the Congress and equal privileges in the transaction of its business and in its discussions, under such rules as may be adopted for the government thereof. The transactions will be published by the American Institute of Homœopathy, and furnished to physicians on such terms as may be decided by the Executive Committee.

It is expected that the proceedings of the Congress will be of the most interesting and important character. While General Medicine, Surgery, Obstetrics and the Specialties will have their place in the discussions, the interests of Homœopathy will fur-

nish the main topics for consideration. It is proposed that one entire day—"Materia Medica Day"—shall be devoted to the subject of the Homœopathic Materia Medica, and the consideration of the questions pertaining to its present status and its further improvement. Homœopathic Therapeutics will also claim a large share of attention, while some of the subjects upon which the Homœopathic school is known to hold a distinctive position will be presented and considered. The essays and addresses on all of these subjects will be presented by physicians carefully chosen by the committee having the matter in charge, and the discussions will be participated in by some of the physicians most distinguished in each department. Arrangements are in progress to secure reports of condition and advancement of Homœopathy in all the countries of the civilized world.

A word as to the place of meeting. Atlantic City, as is well known, extends for a distance of two or three miles along the seacoast of New Jersey, sixty miles southeast of Philadelphia, with which it communicates by three lines of railway and scores of trains daily, most of which make the distance in ninety minutes. New York and Baltimore are within four or five hours' ride, while within a radius of four hundred miles there are nearly four thousand Homœopathic physicians. Atlantic City has, during "the season," a larger patronage than any other of our seacoast resorts, her visitors coming from all quarters of the country, but chiefly from New York, Philadelphia, Baltimore, and the West and South. She has ample hotel accommodations for twenty-five thousand guests. The United States Hotel, which will be the headquarters of the Congress and the place of its meetings, is a new structure, located one square from the beach and within full view of the ocean. It has accommodations for eight hundred guests, and the "pavilion," in which the Congress will assemble, is a large room on the first floor, with a seating capacity for eight hundred persons. The meeting of Congress will occur during "the season," but the United States Hotel will be practically at our exclusive disposal. The scientific and social features of the meeting, and the attractions of Atlantic City as a health and pleasure resort, render it probable that this Congress will be, by far, the largest gathering of Homœopathic physicians ever convened. It is especially suggested that the occasion will furnish an unusal opportunity for our physicians to combine the profit of a scientific convention with the pleasures and benefits of a vacation, both for themselves and their families.

PEMBERTON DUDLEY, M.D.,
General Secretary, A. I. H.
S. W. Cor. 15th and Master Sts., Philadelphia, Pa.

A DELAYED BUT INTERESTING LETTER.

EDITOR HOMŒOPATHIC RECORDER:

It would be of interest, perhaps, to our Eastern brethren to know something of the condition of Homœopathy in the new State of Washington.

The "Far West" is considered by many Eastern people to be but the abode of lawless men and untutored savages—a boundless waste of unknown country where wild beasts roam at will amid the illimitable forests, and the red man holds undivided control of his native fastnesses. But the march of irresistible progress, as the "Star of Empire," has swept over the "boundless West" and reared many magnificent monuments as marks of intelligence and indomitable energy of its people. From the East have come men of brain and brawn, and leveled forests, planted cities and laid the foundation and reared the beginning of a superstructure of a mighty commonwealth.

Along with the tide came Homœopathy, and with characteristic strides marched in the van. From one the practitioners increased, until to-day we have about fifty Homœopathic physicians in the State. To meet the demands of the times, State and local societies have sprung up, which are to-day well organized and in excellent, harmonious working order.

The annual meeting of the State society, at Tacoma, was well attended and a number of excellent papers read and discussed, as well as various questions of local interest. In the evening a banquet was tendered the visitors by the resident physicians. The next meeting of the society will be held at Spokane Falls, the first Tuesday in May, 1891.

During the legislative convention of the Senate and House at the State Capital, we struggled hard against the bitterest opposition and underhand machinations (of our friends the enemy) to get separate boards of medical examiners, but succeeded in all but that. The appointments were made by the Governor giving the different schools (Homœopathy, Allopathy and Eclectic) equal representation on the Board—three each. The president, however, is a Homœopath—Dr. C. Munson, of Tacoma.

While everything appears bright and prosperous, we are not satisfied with the single board system, but will renew the attempt to gain separate examining boards in the fullness of time.

F. W. SOUTHWORTH, M.D.,
Secretary State Homœopathic Society.
Rooms 4 and 5 Gross Block, Tacoma, Wash.

THE INTERNATIONAL HOMŒOPATHIC CONGRESS.

EDITOR OF THE HOMŒOPATHIC RECORDER.

The America Institute's Committee on the International Homœopathic Congress is endeavoring to give direction and character to the essays and discussion of the congress, and to this object more time and energy have been devoted than to any other part of the committee's labors. It would seem that as the themes and discussions of a national medical association naturally take a broader scope than those of a local society, so the work of an International Congress should be more comprehensive and far-reaching than even that of a national convention. This committee is, therefore, seeking to bring before the appoaching Congress some of the broadest and highest questions that confront our profession in all its departments. It is important that the Congress should discuss, for instance, some of the broad and imperative issues of modern surgery, rather than the technical details of some minor or major operation—the influence of the Law of Cure in a whole realm of maladies, rather than the indications for this or that remedy in some particular disease—the construction of a Materia Medica, rather than the symptoms of an individual drug. To this end our committee has labored and, thus far, with most flattering prospects of brilliant success. Papers, bearing upon these classes of subjects, are in course of preparation by physicians selected from among those best qualified for the work, and others, equally distinguished in the various departments have consented to take leading parts in the discussion of the papers.

In order to correct a misapprehension, it may be stated that the object of the committee is not to control the congress, but to serve it. Undoubtedly the congress will adopt and enforce rules of its own, those governing the reception and discussion of essays included. This committee does not deem itself authorized to reject any Paper that may be offered, on any medical or surgical topic whatsoever. Its object is to *in*clude papers of a certain general character, but not to *ex*clude anything. All essays, whether prepared at the instance of the committee, or as voluntary contributions, must be passed upon by the congress or by its delegated authority; but the committee will probably recommend and urge that such of the essays as are more or less in harmony with the views above mentioned shall take precedence of others, and it is quite likely that these will occupy nearly all the available time of the convention.

Notice is hereby given that to insure the publication of the title of any Paper in the "Annual Circular and Programme," said title must be in the hnnds of the undersigned on or before April, 5th, and the paper itself should be sent as soon thereafter as possible, to the chairman of the committee, Dr. T. Y. Kinne, of Paterson, N. J., in order that provison may be made for its discussion.

PEMBERTON DUDLEY, M. D.
Sec. of the Com. & General Secretary of the A. I. H.
Cor. 15th & Market Sts., Philadelphia, Penna.

SELECTIONS AND TRANSLATIONS.

ON EXTERNAL APPLICATIONS IN HOMŒOPATHIC PRACTICE.

By the Late Dr. Hirsch, of Prague.

MEMBRANOUS CROUP.—The efficacy of a powerful skin-irritant has repeatedly been demonstrated to me in desperate cases of membranous croup. I will give a few cases in print:

Case 1: It was in the month of November; the raw, moist atmosphere had produced so much sickness that I was about starting on my visits at a very early hour, when a gentleman was announced from the country, who wanted to see me in a most important matter. A distracted looking gentleman was ushered in, who strenuously begged me to accompany him on an out-going train to see his four-year-old boy, afflicted with membranous croup in its highest stage. The report from the old-school physician, who had spent the whole night with the patient, sounded hopelessly desperate. With calomel, vomitives and embrocations it was sought in vain to stem the progress of the sickness, and as a last resort Homœopathy was to be given a trial. I told the gentleman that it was absolutely impossible to accede to his request, as many very sick patients needed an early visit. However, in answer to the lamentations and prayers of the desperate father, I was induced to make an effort to relieve the patient, and I accordingly gave him a plaster, about 1½ inches in diameter, made of the Resin of Euphorbium, spread on waxed tafeta (of which I always keep a supply on hand), to be applied to the outer skin of the throat, and for internal use he received six powders of Spongia and six of Hepar s. c., each in the 3d trit.; the

plaster was to be applied slightly warmed to the throat, and once every hour was to be administered a powder of Spongia, to be followed with the Hepar powders as soon as the cough should become loosened. It was one of the most joyful moments of my life when, next morning, the father, so desperate yesterday, entered, beaming with joy, and reported that the remedies had a most wonderful effect and the doctor had announced the child to be out of danger. As a rather frequent loose cough still supervened I gave him some more powders of Hepar 3d, and a few days later I received a really touching letter of thanks informing me of the convalescence of the boy.

I am convinced that in this desperate and already allopathically maltreated case Spongia and Hepar of themselves would not have sufficed to save the child.

Case 2: A girl æt. 3 years, of phlegmonous constitution, was afflicted since two days with membranous croup under old-school treatment. Things had come to such a pass that it was prognosticated the girl could not live through the day and tracheotomy was proposed as a last resort. Rather than assent to the fatal operation the parents, counselled by a friend, decided to consult a Homœopath. On my entrance to the sick chamber, the little patient just vomited, for the third time, a bluish fluid, *i. e.* a solution of sulphate of copper which had been administered as an emetic. Immediately thereafter the child presented all symptoms of incipient suffocation; bluish cast of countenance, widely distended alæ nasi, bending back of the head, intense restlessness, an evident struggle with a comatose state, and lastly the characteristic anæsthesia of the skin, a symptom always a precursor of the approaching end. Bouchert, of Paris, first called attention to this peculiar symptom, and this peculiar state accounts for the fact of the remarkable quietude of children during the operation of tracheotomy. As a matter of course, I could not give much encouragement to the parents, but applied at once one of the Euphorbium plasters to the throat, and advised to give her warmed milk frequently, but I refrained for the present from giving Homœopathic medicines on account of the preceding vomiting. On my return, after two hours, I found that the patient had coughed a good deal and with a stronger sound than before, but its looks and the distress in breathing were almost unchanged. The continued lack of sensitiveness of the skin was demonstrated by repeated pricks with a needle. The Euphorbium plaster stuck fast, however, and seemed to have its full effect on the skin, for a moisture commenced to ooze out at the edge and yet the child seemed not to feel its burning as would have been

indicated by gestures. However a decided reaction, both inwardly and outwardly, was certainly manifest which in such a desperate case must be considered a gain. Three hours had passed since the last vomiting, and now I proceeded to give Spongia 6, one drop every hour, and it was my intention to follow it with Iodium, but a written report which was sent a few hours later, at my request, stated that the little patient's cough was stronger and looser which induced me to send a few more Spongia powders.

Late in the evening, on visiting, there was decided improvement; breathing was still labored, but a slight rattling was noticeable, which pointed to a beginning resolution of the crupous exudations. The color of the face was normal, the bluish cast was gone, the insensibility of the skin much less, and pulse stronger, but still accelerated. I now changed to grain doses of Hepar s. c. 3, every three hours, and next morning the condition was so much improved that the child could be declared out of danger. The cough was loose, requiring less effort, breathing was easy, questions were answered with low voice, which did not yet sound quite normal; the child showed more interest and the expression was more natural. It partook of some soup and milk with a relish, and three days after we had the pleasure to see the nearly dead child well again.

I could relate a number of similar cases in which this resin plaster acted favorably, and especially in obstinate cases, or in such as were nearly hopeless by preceding Allopathic treatment. [From the *Popul. Hom. Zeitschr.*]

CONGENITAL HYPERMETROPIA.

A Clinical Case by Dr. Grossmann.—The Case was Diagnosticated as Such by Two Prominent Oculists.

The sixteen-year-old son of a demented artisan was brought to me by his mother, who lamented his half-blind condition. Having finished his schooling he was to be apprenticed to a trade, but no master was willing to take him in this condition. Already in the "kindergarten" the teacher noted his defective vision, and later in school his condition grew so much worse that he had to use the strongest glasses. Patient was somewhat scrofulous and often troubled with angina. The mother evinced a great deal more confidence in my ability to benefit the case than I was able to feel.

In the beginning of August, 1884, I prescribed Zincum 30, a sovereign eye remedy, as I knew from experience. As he still attended school, three doses were given pro die. Within a few days vision became clearer, but several weeks passed without further improvement. In view of the scrofulous diathesis I interpreted another remedy, Kali Bichr. 30. This also did good service; the power of vision grew better. Yet the ever-changing conditions induced me always to go back to Zincum. And so November came on. The eyes pained, while using the strong glasses, so I ordered weaker ones, which were used without discomfort. I now gave the remedies in alternation; also three times a day, and amelioration progressed more rapidly; so that by May, 1885, the cure was completed. Much to the astonishment of the optician he had to furnish weaker and weaker glasses until at last none were necessary, and the boy found no trouble to find an apprenticeship. Up to date no relapse occurred. This is another proof of the potency of our Homœopathic remedies. Not only was an enhanced accommodation achieved but a considerable flattening of the bulb was rectified and a pronounced faulty refraction put to rights.—*From the Allgemeine Hom. Zeitung, December 25, 1890.*

ON EXTERNAL APPLICATIONS IN HOMŒOPATHIC PRACTICE.

By the Late Dr. Hirsch, of Prag.

ŒDEMA GLOTTIS.—Was called early in the morning on February 15th, 1876, to W. B., a man in good circumstances, æt. 64. Was informed that he complained the preceding evening of some pain in the throat and applied a cold compress to the neck. About midnight he was awakened by a hoarse, dry cough and the sensation as of a foreign body being lodged in the throat. The rest of the night was very much disturbed by frequent coughing, and towards morning the difficulty in breathing greatly increased. On entering the sick chamber I found the rather robust patient sitting on the bed, his feet, wrapped in a woolen blanket, on the floor, as the intense distress in breathing rendered a horizontal position impossible; his hands rested on his thighs, and on the nearly suffocating inspirations the head moved backward and forward, face a bluish-gray, the wide open eyes protruding, cold sweat on the forehead, total aphorexia with hissing and whistling efforts at coughing; the whole a picture of a high grade *Œdema Glottis*. The pulse was already quite small, weak and accelerated, heartbeat irregular. Death from

suffocation seemed imminent. Under these circumstances a powerful counter-irritant seemed to be imperative. At the next drug store some ethereal oil of mustard was obtained, a piece of blotting paper the size of a half dollar saturated therewith and quickly tied around the neck. An intense burning sensation became immediately manifest on the entire skin covering the larynx; the application was continued for two or three minutes, and in scarce fifteen minutes after patient, by nodding, indicated that some relief was experienced, which, indeed was also manifested by the expression of the face denoting less desperation and breathing becoming easier. Gratified, I left the patient for two hours, and was still more content when on my return the patient grasped my hand and with scarce audible hoarse voice expressed his thankfulness at the relief afforded. The cough gradually became more loose, and with Hepar s. c. 3 amelioration rapidly progressed. In a few days a very copious accumulation of a thick, tough and very tenacious mucus set in, for which Senega 6, every two hours, afforded prompt relief. Six days from the beginning of the attack reconvalescence was fully established, and within a week after patient had fully recovered. Another similar case, but of less intensity, had been treated by me about eight years previous to this. The patient, a landed proprietor, æt. 40, of robust constitution, had attended the well-filled theatre the evening before, and on driving home in the raw night caught cold. After a few minutes in the carriage he shuddered and felt a rawness in the throat. Arrived at home he took several doses of Aconite and then slept a few hours, awaking in a light transpiration; but a harrassing cough and sensation of dryness in the throat hindered sleep. Called in the morning; I found the patient complaining of a hoarse, raw cough, tickling and scratching in the throat, with some difficulty in swallowing; pulse 90, skin moist, tongue coated yellowish. I diagnosed the case as a rather severe catarrh of the larynx; prescribed *Spongia* and *Aconite* in alternation every hour, and promised to call in the evening. But early in the afternoon I was called again, and he complained, with hoarse, scarcely audible voice, of the distress in breathing, and that the throat seemed to be steadily getting narrower. The anxiety and distress of the patient was intense, and I was also greatly alarmed, for on applying a tongue depressor a thick, reddish swelling appeared in the depth, evidently being the swollen mucous covering of the glottis. And instantly it recurred to me what I had heard from Appolyer's lips: "One of the most dangerous affections is the swelling of the lip of the larynx—œdema glottis—especially on account

of its rapid lethal course." The recollection of these words enhanced my anxiety the more, as this was the first case that came under my observation. To put a stop to this progressing swelling a rapidly acting medicament was imperatively called for. A small vial of oil of mustard was procured at the nearest drug store and a few drops of the light yellow oil of penetrating smell was rubbed, with a piece of cotton, into the skin covering the Adam's apple, of the size of a half dollar, which occasioned an intense burning, but which was gladly submitted to by the patient, as he almost simultaneously experienced a relief in breathing, which became more pronounced after a few minutes, so that I ventured to leave him for a few hours, with the direction to send for a powder, which he was to take at once. The fact that, though the breathing was much relieved, the patient still complained of a sense of swelling or constriction in the larynx, the frequent hoarse, dry cough and the still much swollen mucous membranes of the glottis pointed to Lachesis of all the remedies that I studied, and I accordingly sent him a powder of Milk-sugar, moistened with a drop of the 12th potency. Visiting him two hours later he seemed improved, in so far as the cough sounded less hoarse and dry, and breathing was less labored; on a visit two hours later I was informed that the patient slept tranquilly since over an hour. I left another powder of Lachesis, to be taken should he grow worse, but at next morning's visit I was told that he had slept much and coughed but little during the night, and that the cough was gradually getting loose with expectoration. Breathing, to my astonishment, was normal, the swelling of the mucous membranes had almost entirely subsided, and the rapidly progressing convalescence enabled patient to leave his bed three days later. Very probably Lachesis, if given at once, would have prevented the spreading of the swelling of the mucous membranes, abated the whole attack and rendered superfluous the application of the external remedy, but show me the physician who, at first sight, will at all times succeed in selecting the right remedy. And in the first mentioned case the danger of suffocation was too imminent to permit me, in view of my previous success, to risk a possible loss of time in selecting the internal remedy.—*From Hom. Pop. Zeitschr.*

SAW PALMETTO.

The fluid extract of this invaluable berry (says the *Pacific Record* of Medicine and Surgery), is a tonic far in advance of the comp. hypophosphite, almost equal to the tincture of oats, but

has a special action upon the glands of the reproductive organs, as the mammæ, ovaries, prostate, testes, etc. Its action is that of a great vitalizer, tending to increase their activity, to promote their secreting faculty, and add greatly to their size.

It is especially indicated in all cases of wasting of the testes, such as follows varicocele, or is induced by masturbation, or which is often present in sexual impotency. In gynæcological practice it is much used to promote the growth of the mammæ; and in uterine atrophy dependent upon ovarian blight, its action is unexcelled.

But it is in the prostate gland that this remedy exercises its best effects. Out of every ten men nine have enlarged prostate, and one has atrophy, of same, at ages varying from thirty-five to seventy-five, the result either of early indiscretion, or excesses, or perversion of the sexual act, or sedentary habits, or from improperly cured gonorrhœa.

We could cite case after case of both morbid conditions, in which, by means of this agent, the size of the prostate was equalized, the difficulty of micturation relieved, the stoppage, dribbling, lack of force completely overcome, and the improvement in sexual power most steady and gratifying. A perfect rejuvenation follows the use of palmetto; the general nervous system becomes balanced and invigorated.

It will also allay irritation of the mucous membrane of the throat, nose and larynx. It has been used with decided success in marasmus, phthisis pulmonalis, bronchitis, acute and chronic laryngitis, etc. Dose 5 to 10 drops, three times daily in water.—*American Medical Journal, February, 1890.*

MULLEIN OIL.

I see by the *Journal* that many are beginning to use Oil of Mullein blows. The old school journals say that it is a new remedy of great renown in certain diseases of the ear. I made it for my preceptor over forty years ago, and he used it for deafness and inflammation of the ear, and I have always made it, and keep it on hand as a part of my armamentarium since. If a child has earache I make a little swab with absorbent cotton and dip it in my vial of Mullein Oil, and introduce it into the ear as far as I can, then close the ear with a pledget of cotton, and the little pet almost invariably goes to sleep. Many of my patrons keep a half drachm vial on hand.

If a man comes to me complaining of deafness, I examine his

ear for wax. The next thing is a syringe with milk warm solution of borax, say grs. xx. to water Oj., and use it freely as an injection, being careful not to use too much force. Then comes the Mullein Oil, about three drops morning and evening dropped into the ear and and continued for some time; and in that way I have cured a great many. You will notice the improvement in their hearing in a short time. I also use it in nasal catarrh with frontal headache. ℞.—Take Oil Verbascum Flor., ʒss.; Solution of Cocaine 4 per cent., ʒss. M. Shake well. Introduce up the nostril as far as possible with a small swab two or three times a day. It has done wonders in my hands.—*R. C. Ely, M.D., in Eclectic Medical Journal.*

LATRODECTUS MACTANS IN ANGINA PECTORIS.

S. L. G., a man fifty years old, of bilious temperament, a dentist by profession, had slight attacks of angina after severe exposure and overexertion during "the blizzard" in March, 1888. He did not consider them of sufficient importance to consult a physician about them, but some months later, he had a suppurative prostatitis, which was followed by considerable prostration, and the attacks of angina became very severe. I never could get a satisfactory description of the character of the pain, and I never saw him during a paroxysm. The pain was brought on by exertion of any kind, and was especially frequent soon after dinner. The pain was sometimes felt in the left arm, but was usually confined to the cardiac region. I once or twice detected a slight aortic obstruction sound, but aside from this failed to find any evidence of organic disease. The usual remedies gave no relief, but *Latrodectus* 3c was of great benefit. Under its use the attacks gradually became less frequent and less severe. He has taken no medicine now for at least six months, and he tells me that although he occasionally has a little reminder of his former trouble, the attacks are so slight that he pays no attention to them. I have given the remedy in another similar case, with even more gratifying success. The attacks were very promptly arrested and have not returned, although nearly a year has elapsed. I think we have in this remedy, to which Dr. S. A. Jones directed attention in one of the issues of THE HOMŒOPATHIC RECORDER, a very valuable remedy in this painful affection. It is probably, as Dr. Jones suggests, in angina pectoris vaso-motoria that it will be found especially servicable.—*E. H. Linnell, M. D., in December, 1890, North American Journal of Homœopathy.*

Passiflora Incarnata.—I have used the passiflora for several years. I think it is an anodyne, sedative and soporific. I prescribe it in facial neuralgia affecting the fifth-pair nerves, in which it gives prompt relief given in doses of twenty to forty drops, to be repeated as often as necessary. It is also splendid in neuralgia in any part of the system. Recently I prescribed it in a case of neuralgia of the stomach, in doses of half a drachm, repeated two or three times. It gave prompt relief. So far as I have used it it has no superior in any form of neuralgia in any part of the system. I have also prescribed it in several cases of insomnia with good results. This is the range of my experience with the passiflora. It is said to be good in tetanus, with opisthotonos, trismus, and convulsions of children, but I have never had the opportunity to try it in these affections, hence I cannot say; but I cheerfully recommend it in any form of neuralgia.

Be sure to get a good, pure article, and give it in from twenty to thirty drops at a dose, to be frequently repeated until it gives relief.—*John A. Henning, M. D., in Medical Summary.*

A Strange Eye Remedy.—A gentleman who had used for many years all possible old-school remedies for a stubborn eye-catarrh was asked, on reaching Cairo in his travels, by his native servant why he used so many salves and eye-waters? After explaining that his inability to read induced him to travel, the servant, who was also his interpreter, asked for permission to cure him. Perfectly amazed, the sufferer exclaimed: "What you, a fellahen, offerest to cure an affection which has withstood the skill of the most renowned occulists?" Whereupon he answered "Why not, for my remedy is simple and harmless, and consists solely in that you *refrain for half a year from washing* or even wetting *your eyes or eyelids*, with either cold or warm water. You will have to cleanse your face in front of a mirror, and must carefully guard your eye and, immediate vicinity from contact with your wet sponge." The simplicity and harmlessness of the remedy impressed the patient and in accordance with the old proverb "In dubio abstine," he commenced the very next morning to institute this new negative mode of cure. He merely wiped the exuding pus-like slime with disinfected wadding. With admirable patience and perseverance the patient continued this method day after day, and was able to note some amelioration after a week already. This increased from week to week, and he returned perfectly cured after the lapse of three months and re-entered upon his office which he

thought he could never fill again. Fancy the astonishment of the celebrated specialists who had pronounced his eyes to be incurable. This communication from the lips of a highly respectable and conscientious gentleman was put to practice by the writer of these lines, in many cases of stubborn chronic catarrh of the eyes with the best of success, and he invites his honored colleagues to institute experiments in this direction. — *Dr. G. Proell, of Meran & Gastein, from Popn. Zeitschrift for January.*

N. B.—Dr. Proell is one of the best known and most distinguished Homœopathic practitioners in Europe —[ED. REC.]

Dioscorea Villosa (Wild Yam).—Dioscorea Villosa, a plant which is commonly known as wild yam or colic root, is found in profusion throughout the southern and to a limited extent in the northern and western States. Thirty years ago it was eulogized by King, of the Eclectic School, as a true specific for bilious colic, no other agent being necessary in this disease, as it gives, he reported, prompt and permanent relief in the most severe cases. This statement has been repeated many times since by the Eclectics, and is undoubtedly true. The part of the wild yam used is the root, which is inodorous, but on bruising develops a slight woody odor.

Dioscorea appears to have an especial effect upon the liver, as nux vomica has for the spinal cord. It is a most useful remedy in the treatment of the various diseases of the hepatic system. In that painful affection known as bilious colic, which is the result of the pressure or impaction of one or more gall-stones in the biliary ducts, dioscorea often affords great relief. Indeed, as related by King thirty years ago, and as re-stated by Dr. Todd (*Atlanta Medical and Surgical Journal*) some two years past, every case of bilious colic can be cured in a brief period, varying from a few minutes to a few hours, by the administration of dioscorea alone.

The only qualification necessary to this claim at present is that the case must be of pure biliary nature due to the presence of a gall-stone or of thickened; hardened bile in the biliary ducts, and not cases of intestinal colic from other causes. A good rule in practice is to see if with the colicky pains and nausea there be also any yellowish discoloration of the skin or conjunctiva. If there is, dioscorea will usually give prompt relief; if there is not, it may have to be supplemented with other remedies. Even when the stage of incipiency is passed, when the delicate lining

of the ducts is engorged and inflamed, so that the bile cannot pass through, dioscorea will be found of infinite value in lessening the engorgement, relaxing the tension of the biliary channels, and cutting short the course of the disease. That indefinite complaint known as hepatic torpor or hepatic indigestion, resulting in dull headaches, loss of appetite, mental inaptitude, causeless melancholy, and a train of other symptoms, can be quickly and permanently relieved by dioscorea taken in fifteen-drop doses before meals.—*J. V. Shoemaker, M. D., in A. M. A. Trans. Condensed.*

"EVERY once in a while some young graduate thinks our prejudice has run away with our judgment, and that we might do better with a *judicious* use of mercury. Occasionally he writes an article on the subject, and wonders why we do not publish it. But I have traveled over the ground for thirty-five years, with a larger business than falls to the lot of most men. I know, beyond peradventure, that I have treated and cured my patients without, much better than others have with. I have seen almost all phases of mercurial diseases from the hands of my competitors, and from its judicious use, too. I have known death to result, even from its Homœopathic use; and without thinking of my personal sufferings from mercurials, I say damn the stuff! I have made it a rule of life not to use a remedy that may entail lasting disease. I would not take it under any circumstances; I would not give it."—*Dr Scudder.*

MEDICINE does not differ from any other commodity in the market; a first-class article cannot be had at half-price. The best is usually cheapest in the end. Of medicine it is certainly true.—*Medical Gleaner.*

ACUTE ARTICULAR RHEUMATISM.—Salicylate of Soda, whose use is so widely recommended for this condition, does no more than displace the seat of the malady by sending it to the noble organs.—*Burggraeve.*

TO HAVE any degree of certainty in medicine it was necessary to have certainty of remedies and their preparations. Medicines sold in drug stores were then notoriously bad. They are bad enough yet, but twenty-five years ago they were ten times worse. They ranged from a simple solution of nastiness to that where there was variable quantity of the remedy wanted. The only drugs

you could buy with any certainty were the chemicals, and even here you had to look carefully or you would be cheated. In my first specific use of remedies I was obliged to buy Homœopathic tinctures, or prepare tinctures myself. I did both, and of all the indigenous medicines that I could gather myself I prepared myself. The Homœopathic tinctures at 25 cents an ounce were cheaper than those procured at our own drug stores at $1.00 per pound. The dose of the one was measured by the fraction of a drop, the other by teaspoonsfuls. I said to myself, if the Homœopaths can make uniformly reliable preparations it is possible for the Eclectics to do the same, and I resolved to have it done. The trouble I had need not be recounted; suffice it to say that good promises were followed by unpleasant failures, and the common excuse was: "Pharmacy and drug selling is a business, and if we can not meet the prices of our competitors we can not live." * * * But, as I have said before, we cannot have it without good medicine—without medicine of definite quality and strength—and certainty not without *the* medicinal properties the good Lord has put in the plants. Any one who has ordinary intelligence, common honesty (not trade honesty), and the love of doing things well can prepare good medicines. It makes no difference what he calls them, but I prefer the simple officinal names, Aconite, Belladonna, Phytolacca, etc., and I want but one preparation—a tincture. As for price, I hold that "the laborer is worthy of his hire"—a good thing is worth more than a poor thing.—*Dr. Scudder in Eclectic Medical Journal.*

VETERINARY DEPARTMENT.

Dog.

Shortly before the hunting season commenced Mr. Broxtermain inquired of me whether I knew of a Homœopathic veternarian. I knew of none and on inquiry was told that in the fall of the preceding year his setter, flushed from hunting, swam a very cold river (the Pader) and shortly after became lame and remained so ever since, although under treatment of Allopathic veterinarians, he would therefore be useless for the approaching hunting season. The dog seemed to be worse when trying to get up from his bed. He would yelp and howl for pain and turn and twist pitifully till he gained his legs. The small of the back must be lamed for he waddles when walking, especially at first, and, when trying to rise, his hind legs for a time drag on the

floor. As no one seemed to be able to help him he would have been shot but for his being such an excellent hunter. As a last resort Homœopathy was to be tried. You will not rue it, I said, for if everything is as you report I can give you a remedy which will relieve your dog in a short time. I gave him Rhus Tox. 2d potency, a few pellets to be given morning and evening, dry on the tongue. About a week after a fine setter trotted past me and a hundred yards behind him I encountered Mr. B., on inquiry I learned that the dog I passed was his. The little pellets worked like magic, after four or five days a decided amelioration was noted, although in the present cold rainy weather aggravation was expected, but the little globules were used up. I gave him Rhus Tox. 1, to be given every day, and about two months after I received a magnificent hare with a letter stating, that I should accept it as a small token of gratitude, and that since four weeks the dog had been used in hunting and was as well as ever.—*From Bolle's Pop. Homœop. Zeit.*

Horse.

On September 26th, 1845, I was called to see a horse which was lame in the back. The cause was that, on a previous day, this and another horse were attached to a heavily ladened wagon, when, on descending a hill, the harness broke and the heavy wagon severely crowded the horses, but more especially the one before me. The horse had not lain down in the night, but stood with humped back, all drawn together. On being led out of the stable it swayed the small of the back to and fro; otherwise it seemed all right. I prescribed *Rhus Tox.*, inwardly, morning and evening, and applied externally, every three hours, *Arnica* tincture, diluted with three parts of whisky. On the 22d it seemed to be better; treatment continued. On the 23d I found it had lain down in the night, and on being led but little lameness could be noticed; treatment continued. On the 24th the horse was put to light labor and was well.

Cow.

A cow had calved and everything had progressed normally, as I was told, when a few hours later a prolapsus of the uterus occurred. I found the animal lying down and the whole uterus extruded; this seemed to be accompanied by a constant urging or pressing, and on examining carefully I found the placenta adhering. In order to operate to advantage it was necessary to allay first this constant urging, for which I gave two doses of *Ferrum Mur.* within half an hour; during this time I cleansed the uterus and detached the placenta; the urging was now considerably less; then I replaced the uterus and administered one

dose of *Aconite*, followed by a dose of *Arnica* two hours later; of the latter it received for three days two doses daily, and that completed the case.—*Dr. Mœnch, Veter., in Bolle's Pop. Hom. Zeit.*

Cow.

A fresh cow suddenly lost her entire milk without developing any morbid symptoms. Chamomilla and Belladonna administered on alternate days, one dose a day, brought the milk back in original volume on the sixth day.—*Ibid.*

Dr. Bolle states that the Grand Duke of Oldenburg had decreed that all of his horses should be treated solely Homœopthically. The chief veterinarian of Prince Lippe-Detmold, Dr. Grundlach, treated all horses in the Prince's stables Homœopathically since a number of years.—*Bolle Pop. Hom. Zeitung, Vol. 1 (1855).*

Horse.

Horse Petechial Fever.—On January 16th I was informed that a well-conditioned five-year-old gelding was sick. The stableman reported that the horse did not lay down during the night, had coughed several times, had not touched its morning's feed, but had greedily drunk the proffered water which, however, it seemed to have some difficulty in swallowing. Status praesens was as follows: The chest in front and the forelegs seemed to have an erysipelatous swelling; the walk was feeble and swaying; pulse accelerated (70 per minute) but full and soft; heart beat very perceptible; breathing quick, throat appeared fuller than usual, and on the nasal membrane there appeared irregular dark and purple red spots of various sizes. Gave Bryonia 3, four drops every four hours, tepid water for a drink. On January 17th—Has appetite; pulse 60; breathing quieter; the dark spots on nasal membrane are larger and more extensive; cough frequent accompanied by a copious muco-serous secretion from the nose streaked with blood. Expiration is often accompanied with snorting. Gave Belladonna 3d, four drops, two doses. January 18th—Secretion from the nose mucous and mattery, mixed with blood, which forms ridges around the edge of nostrils; forehead seems to be somewhat swollen, but the swelling of chest and forelegs is growing less; treatment continued. January 19th.—Secretion from the nose lessened, nasal membrane uniformly reddened; pulse nearly normal; swelling of forehead or face confined to nostrils and upper lip; throat clear; appetite good. From January 20th convalescence was established which proceeded at such a pace that on the 24th the horse had fully recovered and was ready for

duty.—*Dr. Carl Bœhm, Veterinarian to Count Erdoedy, from Bolle Pop. Hom. Zeit.*

Horse.

I observed a beautiful effect of *Arnica* recently in a four-year-old gelding. While undergoing training one morning it was roughly started with a whip, when on making a sudden jump forward its forelegs interfered and falling on its side its neck came in contact with a sharp stone. Called a few hours later; I found the horse standing outside of the stable with forelegs spread apart and neck held stiff and sideways, with a fresh cut, half an inch deep, on the right side of the neck; surrounding parts were painfully swollen. The expression of the horse's face denoted pain; it looked anxious, and, at times, as if dazed. The assistance of several men was necessary to bring the horse into the stable, as it threatened to fall every moment. This was evidently a case of violent concussion of the small brain and prolongation of the spinal marrow. *Arnica* 3, inwardly, and diluted tincture externally, in the form of compresses, effected a cure in a few days.—*Dr. C. Bœhm, of Onod, in Ibid.*

BOOK NOTICES.

Fourth Annual Report of the State Board of Health and Vital Statistics of the Commonwealth of Pennsylvania.

Twelve hundred large octavo pages make up this report—twelve hundred pages of reports, statistics, lists, directories, analyses, facts, etc., such as will delight the heart of the man who takes pleasure in such literature. The preparation of a work of this sort must have involved an immense amount of labor, and it is an excellent volume to have in a reference library. J. H. McClelland, M.D., 411 Penn Avenue, Pittsburg, Pa., and Pemberton Dudley, M.D., 1338 North 15th Street, Philadelphia, are members of the Board.

Five Years' Experience in the New Cure of Consumption by Its Own Virus. Presumably on a line with the Method of Koch. Illustrated by Fifty-four Cases. By J. Compton Burnett, M.D. London, 1890. Price, 90 cents. (For sale in the United States by Boericke & Tafel.)

"For a number of years," writes Dr. Burnett, "notably during the past decade, the medical branch of the scientific world has been intently occupied and hard at work with the minute

living causes of infectious and other diseases, and secondarily with the poisons or viruses of the disease processes as a cure or prophylactic of the self-same diseases; more particularly is M. Pasteur best known to the world at large in this connection. But wherever the cure of disease is concerned, the practitioners of scientific Homœopathy have ever been in the van, and it is therefore not surprising that they should have been before all others in using the virus of consumption wherewith to cure consumption itself." But some years ago the Allopathic world was seized with such fearful rigors at the idea of using such things as medicine—some of them are still having spasms about it—that the practice fell into disrepute or was only used in a very quiet way. Dr. Burnett was not of those who gave up the practice, though he kept very quiet about it and would have delayed the publication of this little book had it not been for Koch and his lymph.

The difference between Dr. Burnett's *Bacillinum* and Koch's "Lymph" is this: the former is the virus of the disease itself while the latter is the same virus artificially obtained in an incubator by means of heat and beef jelly. Both proved their remedies. Dr. Burnett, on himself, in the regular Homœopathic way and Dr. Koch by a subcutaneous injection on himself. Dr. Burnett's symptoms were quite as pronounced as those obtained by his rival.

Dr. Burnett's remedy has to all appearances *cured* a great many cases of what were, to all appearances, well marked consumption. Dr. Koch's remedy has not cured a single case of consumption. Dr. Burnett's remedy has harmed no one, while Dr. Koch's is suspected of having caused the death of scores.

It may be of interest to note that Dr. Burnett's *Bacillinum* may be obtained at Boericke & Tafel's pharmacies, a supply having been sent to them from London.

Headaches and Their Concomitant Symptoms, with a complete and concise Repertory-Analysis. By Jno. C. King, M D. Second edition. W. A. Chatterton. 1891. Cloth, 240 pp. $1.50.

This book begins with *Acetic Acid* and ends with *Zincum*, on page 188. Under each remedy is a "note," giving the general character of the headache for which the remedy is especially suitable, and then follows the sections: "Location, Direction, Character," "Other Head Symptoms," "Aggravation," and "Concomitants;" also, under some other remedies, a section on "Ameliorations." From page 188 to the end is occupied with

a very exhaustive Repertory-Analysis. A very complete work indeed. Among the remedies we miss that comparatively late comer, *Epiphegus*, a remedy that has a place of its own in the headaches of American women.

Epitome of Homœopathic Medicine. By William L. Breyfogle, M. D. Hahnemann Publishing House. Cloth. 383 pages. 18 mo. $1.25.

This well-known little work, after being out of the market for several years, has again been reprinted and a very handsome edition is now on the book shelves of the pharmacies. Lippe and Jahr are the fore-bears of this book, Dr. Breyfogle having been a student of Dr. Lippe, and this fact indicates the general trend of the *Epitome*, and will not lessen its value in the eyes of many physicians and students. It is largely a condensation of *Lippe's Materia Medica*, and is a concise, handy and accurate little work.

Health and Study. The Science of Physical Life and Mental Development by Moses T. Runnels, M.D., is the title of a neat pamphlet, The President's Address, delivered before the Missouri Institute of Homœopathy. Pamphlets, as a rule, are necessarily dismissed with the mere mention of their titles, yet they often contain most excellent matter. Here is a thought producer from Dr. Runnel's address: "Culture of Physique is Brain Culture."

We have received sample pages of the new *Standard Dictionary of the English Language*, soon to be published by Funk & Wagnalls. It radically departs from the time-honored style of Johnson, and his successors, but space will not admit of mentioning all these departures. One of them is the making prominent of the meaning of the word *to-day*, and another is that in the quotations not only the author is given but the book and page also, a most excellent feature.

We acknowledge pamphlet, reprint, "Nasal Diseases," by Nathan S. Roberts, M. D., of New York.

READY FOR THE PRESS.

PROSPECTUS.

A Homœopathic Bibliography of the United States from the Year 1825 to the Year 1891, Inclusive, containing alphabetical lists of Homœopathic Books, Magazines and

Pamphlets. Also condensed statements, data and histories of the Societies, Colleges, Hospitals, Asylums, Homes, Nurse Schools, Dispensaries, Pharmacies, Publishers, Directories, Legislation, Principal Books against Homœopathy, and Homœopathic Libraries. Carefully compiled and arranged by Thomas L. Bradford, M. D., Philadelphia, Pa.

This is a book that *ought* to be published for it would at once fill a vacant space on the book-shelf, devoted to Homœopathic Works of Reference, that is vacant and probably always will remain vacant if Dr. Bradford's labor is rejected. The work would be a repertory of Homœopathic History, down to its minutest details, and every true Homœopath should lend his aid by subscribing his name. For the publication will not be undertaken until a sufficient number of copies are subscribed for to justify the undertaking; it involves too much money.

Dr. Bradford's work covers the most difficult part of the field; he has gathered the facts and figures of the infancy of Homœopathy, when the struggle for the mere right of living was often desperate and the men of Homœopathy were not organized as they now are. If these facts are now put in permanent form, the pathway of future writers will be a smooth one for they will but need to start with the year 1892 and with the present multiplicity of magazines and libraries, the work will be comparatively easy.

Dr. Bradford's MSS. is divided into fourteen, sections an idea of which may be obtained from the title, save each section might be subdivided. The Section III, "Societies," includes the National, State, County and City. Societies of the whole country and from the first one organized down to the last. While the work only claims to be a "Bibliography of the United States," it is really something more, as the last section, XVI, contains "List of Homœopathic Books, previously published," presumably previous to 1825, which were chiefly Hahnemann's.

Now, reader, it depends on you whether this patriotic book—it is not precisely patriotic, of course, but you know what we mean—is published or not. What we ask of you to do is to sit down and write a letter, or postal card, stating that you will take a copy of the book when published. Dr. Bradford has placed the matter in the hands of Messrs. Boericke & Tafel, and letters on the subject should be addressed to them. The size of the work will be from 400 to 500 pages. If printed it will be in good style. The price will be $3.00, though should over 500 subscribers be received the price will be reduced to $2.50. Subscribe for it. No better book for the doctor's waiting room tables.

Homœopathic Recorder.

PUBLISHED BI-MONTHLY BY

BOERICKE & TAFEL,

1011 Arch Street, Philadelphia, Pa.

9 North Queen Street, Lancaster, Pa.

SUBSCRIPTION, $1.00 PER ANNUM.

Address communications, books, etc., for the Editor to E. P. Anshutz, P. O. Box 921, Philadelphia, Pa.

PAY UP! Pay up! Pay up! A generous number of our subscribers *have* paid up but a goodly array are in arrears yet and it is to these the cry is sent forth. After a man has paid for his journal he experiences a certain buoyancy and lightness of spirits that is very exhilarating. Something is off his mind and his spirits rise accordingly. Try this prescription.

WE print two communications from Dr. Dudley in reference to the big meeting to be held at Atlantic City next June. Don't skip these but read them and then arrange matters to attend the meeting, if possible. Those who have visited Atlantic City in June need no urging; they know what a delightful place it is in that month. The great tide of holiday humanity has not set in strongly yet at that time, while the place has plenty of select company for all that. Look on the map and it will be noticed that the place, while only ninety minutes' ride from Philadelphia, is yet on the same line of latitude as Washington. It is never very cold at Atlantic, never very warm, and never very wet—save while the rain is actually falling; when it has ceased the earth has sucked it all in and the air is dry and so is the walking. Go, if possible.

DR. JULIO F. CONVERS, of Bogota, United States of Columbia, writes us that in his practice he finds *Jacaranda gualandai* to be a most excellent remedy for Leucorrhœa. "The women of this country do not allow the use of speculum, so that it is a very intractable disease; but my experience with *Jacaranda intus et extra* has been very satisfactory."

WE present in this issue of THE RECORDER the remainder of Dr. R. K. Ghosh's article on *Coca*. Fortunately the paper was divided into two cases, and publishing them separately did not lessen the interest of either. Dr. Ghosh is a physician of wide

experience, having stood high in the ranks of the Allopathic profession before taking up Homœopathy. His papers were eagerly sought by old school journals, which were willing to pay for them at good round rates, but the doctor always refused all compensation. We have another interesting paper from him on *Teucrium* for our next number.

A "PROSPECTUS" will be found under our book notices of a proposed unique work by Dr. Bradford, of Philadelphia. In addition to what is said concerning the subject matter there it may be well to add that the names of all the officers of the various societies are given of the first organization. In fact the proposed work is packed full of interesting items to all true Homœopaths, and they ought not to let it fail for want of a few subscriptions. *Esprit du corps* should prevent this. To be sure nobody asked Dr. Bradford to work so many years on this matter, but he did it, and present and future generations of Homœopaths will thank him.

SOME ONE ought to prove *Heloderma Horridus*. It is said in *Chambers' Journal* to be the only reptile venom that is alkaline and not acid as all the others are. There are great possibilities in it; probably a remedy as mighty as *Lachesis*. The July RECORDER, 1890, it will be rembered, had a number of interesting letters from Chas. D. Belden, M. D., on the subject.

THE Homœopathic Hospital, at Melbourne, Australia, treated 417 cases of typhoid fever during the past year with a mortality of 6.5 per cent. The year previous 408 cases were treated with a mortality of 10. Three thousand pounds have been voted to the Hospital from the public funds. The private donations are also very munificent.

Hepar. A large abscess on the left heel ripened much quicker after *Zincum* 30. The pain becoming intolerable, *Hepar s. c.* was smelled several times, according to Hahnemann's advice in Chronic Diseases. The same night it opened, and afterwards healed much more rapidly than is usual with other abscesses on the same individual. This was one of the first observations that led to the suggestion that *Hepar* might generally promote suppuration.—1828—HERRING.

Zincum. Heartburn; swollen feet and varicose veins during pregnancy.—HERING.

Graphites. Hard scars remaining after disappearance of mammary abscesses.—GUERNSEY.

THE
HOMŒOPATHIC RECORDER.

VOL. VI. PHILADELPHIA AND LANCASTER, MAY, 1891. No. 3.

TEUCRIUM IN LEUCORRHŒA AND BLINDNESS FROM OPACITY (?) OF THE CORNEA.

An up-country girl, aged about 8, complained of inability to walk on account of a pain which she described to have been located between the thighs. The pain had continued for a week or so when the father of the patient consulted an Allopathic physician who prescribed *Iodine-paint* over the inguinal regions. This iodine-application was continued for a week. The pain, instead of abating, gradually increased so as to compel the girl to take to her bed, as she was not able to move. This alarmed the parents of the patient. On the 22d of February, 1883, I was consulted. After taking a history of the case, I made the patient walk in my presence. From the manner of her walking, I was led to the conclusion that the mischief on account of which the patient walked in that fashion was located somewhere about the vagina, and not in the inguinal regions as suspected by the Allopathic physician who had treated the patient first. I examined the patient and discovered that the vagina and its surrounding parts, such as labia majora and minora, the clitoris and the orifice of the urethra, were quite ulcerated. The inguinal glands also were much inflamed, swollen and indurated owing, perhaps, to the reflex irritation from the vaginal ulcers. Suspecting *Leucorrhœa* to be the cause of the mischief, I prescribed Calcarea Carb. 30, three doses daily, for three days. On the 25th of February, 1883, I was called to see the patient again, when, on examination, I found that the ulcers had well nigh healed up and the swelling of the inguinal glands almost reduced to the level of the surrounding parts. I also noticed that the discharges were not from the ulcers, but oozed out from the vagina, and were milky and fetid, becoming yellowish when dried up in the cloth. I prescribed Calcarea Carb. 30, again, only one dose daily, at bed time, at night, for a week. On the 5th of March, 1883, I saw the patient again, when on examination found that the

ulcers had healed up, but the discharges continued rather profuse though they were free from fetor. Now I prescribed a dose of Sulphur 30, every alternate day, for a week. On the 16th March, 1883, I saw the patient again. On examination I found that the ulcers had entirely gone; the patient did not feel any difficulty in walking, nor was there any pain or swelling about the inguinal regions; but the discharges continued, though less profuse than when I had seen her last time. I precribed Calcarea Carb. 30, again, a dose daily at bed time at night, for a week. On the 25th of March, 1883, I saw the patient again, and on examination I found no ulcers, nor any discharge, but the patient complained of much itching about the vagina, as also a tensive uneasiness there. Now I thought some oily application was necessary. Accordingly I prescribed Glycerine and Olive Oil (Glycerine, M 20, Olive Oil, ℥j;) over the vagina and its surrounding parts as an external application. Three days' application of this oil removed the trouble and the patient remained well till July, 1883, when I was called to see the patient again. On examination I found profuse milky discharges from the vagina, as also itching and excoriations in the surrounding parts.

Now I suspected the presence of small thread-worms about the rectum, and on enqiry I learned that the girl had almost constant water-brash, grinding of the teeth during sleep and pricking sensation about the arms and the point of the nose. Her urine also was turbid and left a white mark like that of lime water on the floor when dried up. I also learned from inquiry that the girl had passed on two or three occasions lumps of small thread-worms within three or four months. These symptoms led me to the conclusion that worms about the rectum must have been the cause of Leucorrhœa. So I prescribed Cina. 30, three doses daily, for a week. On the 18th of July, 1883, I saw the patient again, when I saw no improvement. I prescribed Cina 12, three doses daily, for a week. On the 26th of July, 1883, I was informed by the father of the patient that his daughter was in the same state as when I had seen her the last time. On the 3d of August, 1883, I was called to see the patient when also I found no improvement. Now I prescribed Cina 6x, three doses daily, for a week, after which I saw the patient again, but found no improvement. I prescribed Cina 3x, three doses daily for a week, and yet no improvement was noticeable. I now prescribed Cina 1x, three doses daily, for a week, after which I was informed that the patient was in every way in the same state as reported the last time. So I gave up *Cina in disgust*. Now I was really in difficulty for finding out a

suitable remedy for this patient. I referred to our Materia Medica and my selection fell upon *Teucrium*. My past experience in the treatment of worm affections with this agent had led me to the conclusion that it did not work properly if prescribed at a potency above the 3x. So I prescribed Teucrium 3x, three doses daily, for a week. On the fourth day I was informed that the patient felt better, after which I saw the patient and on examination found that the improvement, reported by the father, was a fact. There were no ulcers in the vagina or its surrounding parts, nor much discharges of Leucorrhœa. I again prescribed Teucrium 3x, three doses daily, for a week, after which I saw the patient again, when I found that the improvement which I had noticed on the occasion of my last visit was stationary and that the patient was neither better nor worse. I prescribed Teucrium 1x, three doses daily, for a week. After six doses of Teucrium 1x were taken, the patient passed thrice lumps of small thread worms. I was called to see the patient again, and on examination I found that the ulcers had nearly healed up and that Leucorrhœal discharges had also decreased, so that nothing more than a little moisture was noticeable in the parts. I prescribed Teucrium 1x again, a dose daily, at bedtime at night, for a week. During this week also the patient passed once a lump of small thread worms. I was called to see her again, when, on examination, I found that the ulcers had healed up and there were no Leucorrhœal discharges; but the patient felt itching and irritation about the vagina, for which I ordered the external application of Glycerine and Olive Oil, as before, which removed the trouble. The patient got quite well.

In March, 1887, the father of the patient saw me and told the following story regarding his daughter's defective sight, which I was well aware of when I treated her for Leucorrhœa. The girl had an attack of Low-Remittent Fever, with severe brain symptoms, at the age of four, after which she became almost blind. Since then her sight had become so defective that she could scarcely see anything but glaring light, which also appeared to her very dim. The father also told me that the sight of his daughter began to be better when she commenced taking the last medicine (Teucrium 1x), and that she could now see things around her, though indistinctly. He also told me that he believed that the medicine had done his daughter much good, and that it was likely to improve her sight or cure her entirely of the disease. He urged me to prescribe the medicine for the patient. But, not knowing that Teucrium had any curative power over any disease of the eyes affecting the sight, I was quite disinclined to prescribe it. Be-

sides, I did not know the kind of affection which the father of the patient said his daughter was suffering from. But the father would not leave me, if I did not prescribe the medicine. So I prescribed Teucrium 1x, reluctantly though, and ordered for ʒii of the medicine, directing the father to allow only one dose daily, at bed time, at night. I did not see the patient till April, 1888, when I left Calcutta for change and was away till October, 1889, when I accidentally met the father of the patient at Barabázór. He thanked me as if with a thousand tongues for the marvelous cure of his daughter's dimsightedness by taking a two drachm bottle of Teucrium 1x, which I had prescribed at the time of my leaving Calcutta in April, 1888. In July last I was called to open an abscess in the left breast of the patient, which I believe was owing to excessive secretion of milk two months after she gave birth to a child, and I was much delighted and surprised to see her sight becoming so perfect as to enable her to distinguish black hairs from the gray ones, as I heard her remarking that the hairs of my head and beard had become gray and that I had grown old.

Now, I cannot say anything about the kind of affection of the eye which the patient was suffering from when I treated her for Leucorrhœa; but from what I have gathered from personal experience of a large number of patients I have treated from time to time, I have inclined to the belief that the case must have been one of *Opacity of the Cornea* which generally occurs after exhausting Low-Remittent Fever in this country and which I have never seen before this cured by any existing *pathies*, or systems of medicine. The cure of the supposed Opacity of the Cornea with Teucrium in this girl's case tempted me to try it in that affection when occasion offered. The father of the patient, who forms the subject matter of this paper, came to me with a boy, aged about 11, and consulted me in September last, in connection with the boy's affection. I sent the boy to the eye infirmary, attached to the medical college here, for a thorough examination. The hospital authorities, after examination, granted the patient a *ticket* in which I found it stated in the column of disease "Opacity of the Cornea" "probably owing to ulceration in that part, as we gather from a history of this case." I prescribed Teucrium 3x, three doses daily for a week. On the 18th of September, 1890, the boy was brought to me when I found that he could see my finger, my eyes, nose, etc., but very hazily. It ought to be mentioned here that when the boy was first brought to me he appeared to me as "stone-blind," seeing nothing that was presented before his eyes when I examined

him on the first day. I prescribed Teucrium 3x again, only two doses daily, for a week. On the 26th of September, the boy was again brought to me and on examination I found that he could see the thinner end of the steel pen holder which I presented before his eyes. I prescribed Teucrium 3x again, only one dose daily, at bed-time, at night, for a week after which I examined the boy again, but found no more improvement in the sight than when I had examined him last time. I again prescribed Teucrium 3x, in the same way for a week, after which I examined the patient again, but found no improvement. I stopped the medicine and prescribed Cod Liver Oil, 5 drops at noon, and 5 drops at night daily after meals. The boy did not come to me till the 4th of December last, when I examined him and found that he was in the same state as when I had seen him last. I prescribed Teucrium 1x, three doses daily for a week, after which he saw me again, when on examination I found no more improvement in the sight than what I had noticed when I had seen him last. Now I came to the conclusion that Teucrium had done what it could do in this case, and could do no more.

From a study of the case of Leucorrhœa of the girl under review, and also from personal observation of some cases of Leucorrhœa resulting from irritation of small thread-worms about the rectum which I have successfully treated from time to time with Teucrium, as also from what I have been observing in a case of Leucorrhœa of a girl of about 6, supposed to have its origin in the presence of small thread-worms about the rectum, improving under my treatment by Teucrium 1x, I am inclined to recommend it to the profession in the treatment of Leucorrhœa of girls of tender age, which I believe has its origin in this country at least, in the presence of small thread-worms about the rectum. It is likely to be of little or no use where the disease has no such origin, as also in cases of women from *uterine* causes. I would also recommend the use of Teucrium to the profession in cases of opacity of the cornea when occasion offered.

R. K. GHOSH.

70 | 1 Mániktalá Street, Calcutta, January 21st, 1891.

COLLINSONIA CANADENSIS.

A few words concerning the empirical use of this article of our Materia Medica may serve the purpose of directing the attention of the profession to valuable curative properties—not generally thought to belong to it.

In this part of the valley of the West Branch, for years, *Collinsonia* has been used in domestic practice, as a specific for Rheumatism.

Some marvelous cures are reported from its use. Made into a saturated tincture with gin—a tablespoonful three times a day is the usual dose prescribed. My observations concerning the use of this drug in rheumatic affections would coincide with the good opinion of the people in regard to it.

One of the things to me inexplicable is, how such large doses can be taken and not produce any apparent bad effects. It is not difficult to give a reason for its *curative* action, for we find by reference to such provings as we have, that it produces rheumatic pains of the joints and membranes of the heart.

"Our country cousins" are therefore unconsciously practicing on the principle of *Similia.*, and whilst the dose is unnecessarily large they adhere strictly to the single remedy and of course they know what cures.

Will small doses cure? Well, yes, of course. My use of the drug is not extensive, but when I have occasion to administer it—a few drops of the tincture or the 1x acts promptly and satisfactorily.

It is not the design of this paper to point out the symptoms, indicating the use of Collinsonia in the treatment of this hydra commonly known as Rheumatism; but rather as stated above to call attention to a remedy little used, but which may prove to be of inestimable value.

The following case was recently treated by the writer:

M—, a woodsman, age 30 or 35, dark complexion, bilious temperament, contracted rheumatism in "camp," and came here for treatment. It was of the sub-acute and vagrant kind. One after another, nearly every joint in his body was affected. First, one foot and ankle; then, leaving there, it would locate in the shoulder, elbow, wrist or hand. The pain was not excessive, neither was the swelling.

Colchicum seemed indicated, and for a time did good, but soon lost its effect. *Collinsonia* was now in order. A few drops of the tincture in a half tumbler of water, of which a teaspoonful was given every two hours, aside from sleeping hours. Within twenty-four hours there was a decided improvement. The prescription was continued and recovery was rapid and complete within a week after taking the first dose of *Collinsonia*. It would not be a difficult task to point out scores of cases along this river and its tributaries that have been succcessfully treated with this remedy, some of which were remarkable. One, an

old school M.D., bedfast for weeks, which neither he nor his colleagues could cure, was finally cured by a layman, with "hard root," the name by which the drug is known hereabouts.

By way of caution permit me to suggest that in case of organic disease of the heart *Collinsonia* should be used only highly diluted.

Dr. E. M. Hale believes that *Collinsonia* acts primarily on the *heart*, and hence the portal congestion, cough haemoptysis, and even hemorrhoids are within its sphere of curative action. From the same work we find it has produced upon the "Superior extremities; frequent rheumatic pains in the hands, arms and legs, from the dilutions." "Lower extremities severe pain in both knees, passing down to the feet on the inside of the legs."

F. S. SMITH, M.D.

Lock Haven, Pa.

KEYSTONE POINTERS.

The transactions of the twenty-sixth session of the Homœopathic Medical Society of the State of Pennsylvania comes promptly to hand. Skimming its pages for practical pointers THE RECORDER finds the following:

Epithelioma of the Fauces.

In December, 1889, Dr. Chandler Weaver, of Fox Chase, Philadelphia, met an acquaintance, a minister, on the train who asked him if Homœopathy could do anything towards relieving the *pain* of Cancer. Dr. Weaver replied that it could and might even go further, and cure. The patient was very doubtful on this point for he was a man condemned to death by an eminent specialist and the condemnation had been confirmed by Drs. Tyson and Smith, of the University of Pennsylvania, who, after a microscopic examination, had pronounced it "a decided case of Epithelioma." Patient was 70 years old, and did not use tobacco or intoxicants, and had no syphilitic taint. "There is no use your trying to cure" said he as he took his first medicine, *Arsenicum* 3x, to be taken every two hours for one week, also a little 4x *Ars.*, trituration to blow on the denuded parts. La Grippe intervened which was met with *Gelsemium*. After seventeen days of *Arsenicum* the debility of the patient was less and he rested better. Dr. H. F. Ivens was now consulted and the *Arsenicum* was discontinued and *Calendula*, 5 drops on No. 30 pellets, enough for one week, six to be taken every two

hours, also a 20 per cent. solution of *Calendula* and water to be used as a spray, was substituted. This was on January 20th. The *Calendula* was continued to February 11, in same manner and then dropped to every three hours, and on February 4th to every four hours. On March 10, "all the parts that had been affected were natural in color and perfectly painless." On June 9th the patient called on the specialist who had condemned him to death and after a careful examination he pronounced the case perfectly cured.

Alstonia Constricta.

Dr. W. G. Dietz, of Hazleton, reported six cases of women cured by this remedy. The first presented the following picture: "Pale, emaciated; complained of great debility; weak feeling in abdomen, accompanied by a dragging sensation as though everything would escape through the vulva; nausea mornings on getting up; has to lie down again to prevent vomiting; frequent fainting spells, especially after her menses. Very despondent; thinks she will die. The pale face flushes up from the least excitement; (has taken iron *ad nauseum*). Appetite always poor; the food seems to remain undigested in the stomach for a long time. Tongue coated white, with very red edges. Frequent attacks of cramp in the stomach after midnight. Diarrhœa of undigested food, immediately after eating; has to leave the table before finishing his meal (*ferrum*). Urine normal, specific gravity 1018; acid reaction, and neither albumin nor sugar. Frequent attacks of palpitation." *Puls.*, *lil. tig.*, *aletris*, *sulph.*, *aloe* and *nat. mur.*, were given at different times, but at the end of a year the patient was no better. *Alstonia constricta* 1x was then given, a dose every three hours, and improvement soon set in and in time complete curé.

Another patient had yellowish-brown leucorrhœa very weakening, followed by a dragging and bearing down sensation in the uterine region, making walking painful, backache, shooting pains, and at times aching in right ovarian, which was painful to pressure. Menses dirty brown, accompanied by cramping pains in the uterus, always preceded by diarrhœa; debility and nausea in the morning on awakening. Had been treated by a noted gynæcologist with no success. Several remedies were tried, but *Alstonia Constricta* cured.

The other cases were in general similar, three married and three unmarried. Dr. Dietz's experience leads him to the belief that the remedy "will prove useful in a class of disorders, especially in those peculiar to women, which frequently prove

quite rebellious, even under the most carefully conducted treatment." "Debility appears to be a keynote for the employment of this remedy, if dependent on a lack of digestive power on part of the stomach, or else, of assimilative power of the system at large. In debility of a purely nervous type it has failed entirely."

Alstonia Constricta is one of "Hale's new remedies" and was brought to the notice of the Homœopathic profession by Dr. Cathcart, of Australia. Dr. Cathcart says: "I have abundantly satisfied myself that, in large doses, its action is that of invariably producing great debility and general prostration or low fevers, often with diarrhœa." Dr. Cathcart used it with success in debility following scarletina, parturition, under-lactation, in diarrhœa of undigested food, dysentery caused by bad water contaminated with decayed vegetation and in simple atonic dyspepsia with loss of appetite. He generally uses 2d decimal, though sometimes lower. While there is no published proving of the remedy yet Dr. Cathcart was led to its use by provings on himself and friends.

The Totality.

Dr. W. J. Martin, of Pittsburgh, read a paper that is suggestive. Here is its "key-note." "I gave *mercurius cyanatus* 6, not because it was indicated, but because, not knowing what was indicated, and knowing that the case was diphtheria, I gave it as a good diphtheritic remedy. In answer to the query, What better can we do sometimes under these circumstances? I think I would be right in saying, 'Do nothing. Wait and watch the case until you feel sure you see the right remedy; then give it.'" *Merc. cy.* didn't cure this case, and the doctor waited until he had eight symptoms; found a remedy that had seven of them, gave it, and, being homœopathic to the case, it cured promptly.

Dr. Martin pours hot shot at those Homœopathic physicians who swab throats, etc., etc. He also has a good word for that once highly abused—verbally abused—remedy *Psorinum*. "I would be at a loss to know what to do in some cases without *Psorinum*." The following interesting item is found in his paper.

"July 18, 1890, Baby F. vomits milk in large curds. After vomiting the child is much exhausted. *Æthusa* 200, every two hours. July 21. The child does not vomit now, but has diarrhœa. The stools are profuse, green, slimy and *odorless*. It is an odd thing to meet with a case of infantile diarrhœa where the stools are odorless. *Paullinia sorbilis* is the odd remedy for this odd condition. I never had occasion before to use the remedy, and prescribed it in this case with a feeling of curiosity as to the

result. The twelfth potency was given. Three days later the child was reported better; the stools yellow, not too frequent and of natural odoriferousness."

Goitre.

Dr. Chas. Mohr's paper concludes as follows: "Did time permit I could give a detailed account of other similar cases, as well as of cases in which there was not so marked a co-relation between the thyroid gland and the glandular organs peculiar to women. But, even in cases where there was no very marked connection, I have still found it necessary to adopt remedies occasionally to functional derangement of the sexual system, and my experience has taught me to give up the routine use of *iodine* and *spongia*, and to individualize each case, adapting the remedy to the sum of all the symptoms which were found to be most characteristic in the sexual sphere."

The Lungs.

Dr. E. R. Snader, of Philadelphia, read an exhaustive paper on the lungs and the advantage of deep breathing exercise. "I do not wish to be dogmatic about the efficiency or inefficiency of oxygen or other inhalants; I wish simply to say that my results obtained from deep breathing alone are more than favorably comparable with those obtained by the use of inhalants." The general tenor of the paper was that deep inhalations practiced regularly are the best means of overcoming a tendency to consumption, and stoop shoulders.

Stone in the Bladder.

Dr. Chas. M. Thomas read a short paper giving summary of forty-six operations for stone in the bladder; only four died and these rather from other causes than the operation.

Surgery vs. the Indicated Remedy.

Dr. Sarah J. Coe, of Wilkesbarre asks: "In the rush and push of business pressure, are we not drifting away rapidly from the hard study and clear discrimination which is required to successfully treat and cure diseases medicinally when we resort immediately to surgical means for a cure, knowing that a knowledge of general surgical principles is all that is required?" Then, after a number of typical cases, "To treat pelvic diseases with medicine unaided by surgery requires careful discrimination, more of the time and patience of the physician, with as good, if not better, results to the patient."

Tumors.

Dr. Mary J. Branson, of Philadelphia, gave a gentle dig at the

free use of the knife. "We cannot cut out a constitutional taint, no matter what its manifestations, but we may be able to neutralize this weakness by the truly selected remedy." The fruits of her practice are thus summarized: "In glancing hastily over my books I find, out of thirty-five cases of fibroids, only four have been operated upon. Two with prompt relief of all the symptoms; two recovered after a year of varied discomforts; six patients have remained stationary; seventeen so much improved as to insist no further medicine was necessary, though still under observation; eight are perfectly well." Eight cases are given in brief. Miss ——, aged 49, "has large fibrous growth matting together uterus and ovary, and packing the pelvis solid with diseased structure. Each month an exhaustive hemorrhage occurred. Under the indicated remedy, oftener *arsenic iod.* than any other, the hemorrhage has ceased, and the pain so far diminished as to enable her to do all the work in a good-sized house with family of three, and the tumor has somewhat diminished." Another "Mrs. G——, aged 65, solid tumor of right ovary. She was extremely anxious for an operation, but three excellent surgeons refused it. Her suffering was from frequent irregular hemorrhages and attacks of ovarian pain. Under *millefolium* the pains have entirely ceased, and it is now two months since she had any hemorrhages." Another patient had a uterine fibroid the size of a cobblestone and almost as hard, a wen on her head and a tumor on left shoulder the size of her fist, but under the indicated remedy "she has no suffering at all. The tumor is soft and elastic, and she forgets all about its existence."

Homœopathy.

Dr. W. H. Bigler reported an "Enigmatical Case" in which "with a conservatism which may seem culpable to some, and to myself even at times, seemed hazardous, I determined to risk internal treatment before removing the eye." Well, the result was, after a long struggle, the patient's eye was saved.

Ear Wax.

Dr. H. K. Hoy, of Bellefonte, related in his paper the case of an elderly college president who, losing his hearing, went to New York and consulted an eminent specialist who "examined this college president's ears, and in these ears he found a disease to which he gave a tremendous name, and then he got his fee." The dejected patient returned home, consulted his country doctor, "of no aural pretensions," who removed a lot of impacted cerumen and the hearing was restored, and remained so.

Onosmodium Virginicum.

This little known remedy was the text of a paper by Dr. H. F. Ivens, of Philadelphia. The patient was a sufferer for ten years from headache. Dr. Ivens sums up the indications for this remedy as follows—it may be stated that he completely cured his case—"Constant dull headache, chifly centered over the left eye and in the left temple; at times so sharp as to be almost unendurable; pain not aggravated by light, noises, or use of eyes, but always worse in the dark and lying down; all of which, though somewhat relieved by the use of compound cylinders, and the relief to a naso-pharyngeal catarrh, were not cured until three doses *Onosmodium* tincture had been taken at twelve-hour intervals, the chronic dull pain never returning, and the acute suffering seldom recurring, and always soon relieved after a repetition of the drug." *Onosmodium* will bear looking up for headaches of this character, which glasses will not relieve. Perhaps it might at times even obviate the use of glasses. Dr. Ivens gave it in pellets medicated with the tincture.

CORRESPONDENCE.

ERYTHROXYLON COCA OR PLATINA?

EDITOR OF THE HOMŒOPATHIC RECORDER.

I have received No. 2, Vol. VI. of THE HOMŒOPATHIC RECORDER and read the first article, "Erythroxylon Coca and some of its clinical and therapeutic uses," by Dr. R. K. Ghosh, of Calcutta. Before I had finished perusing the first page I became convinced that *Platina* was the proper remedy in this case. The Doctor prescribed *Canth. 3x* a dose every two hours. This relieved the urinary trouble, but exerted no influence over the nymphomania. Some time after this the Doctor was sent for again to treat the nymphomania. He prescribed again *Canth. 3x* a dose three times daily, for three days, and the patient remained well for four days, when the nymphomania reappeared and the Doctor was sent for again. He again prescribed *Canth. 3x* a dose every three hours, which removed the urinary trouble; but the nymphomania remained intact. To prescribe *Canth. 3x* on these three different occasions, with so little result, implies a degree of confidence in the remedy which does not seem justified by the circumstances and by the symptoms. The doctor then

prescribed *Phosph. 6*, three doses daily, for three days, no improvement. Then *Phosph. 12*, three doses daily, for three days, no improvement; then *Phosph. 30*, three doses daily, for three days, no improvement; then *Phosph. 200*, a dose every other day, for a week, without much improvement. From the persistency with which these two remedies were given with little or no effect, one is tempted to think that Dr. Ghosh regarded them as the two great remedies in this affection, and the only ones that promised relief; in other words, *the grand specifics*.

The pathogenesis of *Platina* has: nymphomania, worse in the lying in; tingling or tittilation in the genital organs of women; pruritus vulvæ; voluptuous tingling with anxiety and palpitation; excessive sexual desire, premature or excessive development of the sexual instinct erotomania; insatiable desire; hyper irritations; itching in uterus; sudden sexual passion, terrible sexual excitement, so that her whole nature seemed changed, etc., etc.

It seems strange that a remedy with such a pathogenesis should not have occurred to Dr. Ghosh in the case which he describes.

The nymphomania in Dr. Ghosh's case finally disappeared during the administration of Coca ϑ in one drop doses. The pathogenesis of Coca is almost devoid of sexual symptoms, and it does not appear what led the doctor to the selection of this remedy. I certainly should not expect it to cure such a case from its pathogenesis.

Two show what *Plat.* can do I will briefly mention the following case:

Miss K., æt. 27, a school teacher, dark hair and complexion, well developed, awake occasionally at night feeling heated and feverish, with heart violently palpitating, hurried breathing and great excitement, with some discharge of mucus from the vagina. She was too modest to express herself fully on the subject; but it was evidently a case of sexual emissions accompanied by nymphomania, and while I had no hope of curing it in the absence of marriage, which was in my judgment the similimum for this case, I prescribed *Plat.* 30, three times daily; continued for several weeks; under the influence of this remedy the emissions diminished in frequency and finally disappeared, to my surprise.

I do not mention this case as a parallel to Dr. Ghosh's case, but to illustrate the power of *Plat.* over nymphomania and other abnormally developed cases of sexual instinct.

C. W. SONNENSCHMIDT, M. D.

Washington, D. C., March 23, 1891.

WESTERN ACADEMY OF HOMŒOPATHY.

EDITOR OF THE HOMŒOPATHIC RECORDER.

To the members of the Western Academy of Homœopathy: In accordance with the wishes of a majority of the members of the Academy, it has been agreed by the executive committee to hold the next annual meeting in connection with the International Homœopathic Congress, at Atlantic City, New Jersey, June 17, 1891. On the third day of the session, the Western Academy will meet for the purpose of electing its officers and determining the time and place of the annual meeting of 1892.

C. J. BURGER, M.D.,
President.

Boonesville, Mo., April 4.

EDITOR OF THE HOMŒOPATHIC RECORDER.

You committed a sad mistake by mentioning my name as R. K. Ghosh, M.D., at the foot of my contribution on "Ceanothus in Leucorrhœa and Suppression of the Menses," published on page 259 in the last November number of the HOMŒOPATHIC RECORDER. On receipt of that number of the journal I sent a protest against your so doing, as I do not hold the degree of "Doctor of Medicine." I am sorry the same mistake has been repeated in my paper on "Erythroxylon Coca, and Some of Its Clinical Therapeutic Uses," published on page 15 of the last January number of THE RECORDER also. I hope you will kindly see that the mistake may not any more be repeated. I should ask you to refer to the manuscript of my contributions already published in THE RECORDER from time to time, from which you will at once see that I never signed myself as R. K. GHOSH, M.D., therein. An early insertion to this protest in a prominent place of your journal, to disabuse the minds of your readers, will highly oblige

Yours faithfully,

R. K. GHOSH.

70 | 1 Mániktalá Street, Calcutta, March 4, 1891.

[Our correspondent, we believe, is what is known in India as a "Homœopathic Practitioner," hence the error. We notice that two other journals, publishing papers from same author, have made the same mistake.—RECORDER.]

EDITOR OF THE HOMŒOPATHIC RECORDER.

At the April meeting of the Rhode Island Homœopathic Society it was unanimously voted that the American Institute of Homœopathy be invited to hold the session of 1892 within the boundaries of that State. It is understood, accidents excepted, that the particular place will be the Ocean House, Newport, and the time the fourth week in June.

Yours truly,

GEO. B. PECK, *Treas.*

EDITOR OF THE HOMŒOPATHIC RECORDER:

There is a good opening for a Homœopathic physician at Avalon, Livingston county, Mo. Dr. F. E. Coffee, of that place, died on April 8th, and the people greatly desire one of our school to take his place. It is a college town and there is only one other physician there.

Yours truly,

Helena, Mo., April 22, 1891. J. F. FAIR, M.D.

SELECTIONS AND TRANSLATIONS.

DR. NEUSCHAFER'S HYPODERMIC USE OF THUJA.

By Dr. Alexander Viller.

Translated from Hom. Zeitung, by Rudolf Bauer, M. D.

Great thoughts given to mankind frequently bear fruit in fields apparently remote from the region of original research. Dr. Sick called attention to the support given our Homœopathic theory by the methods of Koch, and showed how some disputed principles of our school were given a solid foundation thereby. But this new discovery has also been productive of practical results, the value of which cannot be properly estimated at present.

Dr. Neuschafer has given enthusiastic reports of cures obtained in tuberculosis by subcutaneous injections of Homœopathic remedies. As Dr. Neuschafer is a thorough scientist, his reported remarkable results merit serious considerations.

The first case was a delicate child, nine years old, who had always been sickly and frequently suffered from various scrofulous affections.

When two years old the child, which was previously apparently

well, had an attack of pneumonia, from which it recovered without any sequelæ. Until four years old it suffered from scrofulous conjunctivitis. After the fifth year suppurating abscesses formed on the right upper arm; similar abscesses, each as large as half an egg, formed on the right forearm, which for the last eighteen months have continued to suppurate profusely. There were also on both cheeks, on the neck and below the left knee similar suppurating swellings. The right ankle was swollen twice the natural size, and on the anterior surface there was a large, profusely suppurating abscess.

The mother says all these swellings and abscesses have discharged for months an extremely offensive-smelling pus, which was so profuse that it could only be prevented from oozing through the bandages by changing them twice every day; the child suffered much pain, could not sleep, and became greatly emaciated.

Dr. Neuschafer felt himself justified in calling these manifestations tubercular.

On November 17th he injected a gramme of watery solution of Thuja into the back, the injection containing three drops of the tincture.

The injection pained the child very much, and Dr. Neuschafer, who took one for experimental purposes, says the pain was of an intense burning character. In him it produced no effect and was not followed by any reactionary manifestations.

In the child, however, it caused by next day complete cessation of the suppuration; nor has it since returned.

The child became cheerful, the fever disappeared, the appetite was restored, and the child could sleep.

On November 20th one drop of Thuja was injected; the operation was almost painless.

The former ulcerated, suppurating surfaces gradually, within the next four days, became covered with crusts, beneath which there appeared a perfectly dry surface; the general condition of the child was good.

Injections of one drop of Thuja were given November 25th, November 30th, and December 4th, without causing any further changes.

Interesting changes also occurred in the swollen and deformed ankle joints; the offensive, purulent discharges from the fistulous openings ceased and the swelling decreased 10 cm.; with care the child could now stand upon the foot, while formerly it had no use of the leg whatever.

On December 7th, I saw the child. It was cheerful and well

nourished. On the right cheek, on the right side of the neck, and on the right forearm near the elbow joint were thick yellow crusts, about as large as a thaler, but very slightly fissured. In such places where the crusts crumbled off, as at the edges, there could be seen an underlying, delicate, dry, newly-formed skin, but no raw surface could be discovered.

The right ankle-joint was greatly deformed. Two fistulous openings upon the anterior aspect of the joint no longer discharged as formerly and were lightly covered by thick crusts. On the heel there was a spot about as large as a thumb-nail, from which there still continued a slight discharge of inodorous pus. Slight passive motion of the joints caused no pain.

Dr. Neuschafer considered this case to be of tubercular nature, and believes he has made the discovery that injections of Thuja will cure certain forms of tuberculosis. He therefore gave two injections of Thuja to a subject who had small cavities in the lungs but was prevented from making further observations of the case. He however intends to try it in similar cases and hopes that his colleagues will make similar experiments.

The results obtained in the case described were very remarkable, and could not have been produced by a reactionary power of the system unaided by drugs. The only remedy used was the injections of Thuja, so that the casual relationship existing between its therapeutic application and the results produced cannot be denied.

I am of the opinion, however, that we are not justified in calling such cases tubercular, although such affections of the joints are usually considered so. I believe microscopic investigation would not always support such a diagnosis.

I therefore believe that the cure effected by Dr. Neuschafer was one of severe scrofulosis. After having seen the child, I can hardly speak otherwise of it than as an accomplished cure. The rapidity with which the curative changes occurred is remarkable; the improvement which steadily continued through nineteen days of observation I also consider very important. I shall use the injections of Thuja at the first opportunity which presents itself. All of us should resort to this new form of medication; thus we may gradually learn the action of homœopathic remedies when administered subcutaneously.

Under the heading of "Subcutaneous Medication" Dr. Neuschafer writes: Our little patient feels quite well; but strange to say, all the crusts have not yet fallen off; the adherence of these crusts may be due to an impaired activity of the skin.

The patient has gained 2½ lbs., and now weighs 41 ½ lbs. This, for a girl of nine years, indicates a low degree of vitality.

It is difficult to foretell what the condition of the foot will be; a permanent deformity will probably remain.

Injections so far given are as follows:

November 17th, 3:100.

November 20th and 25th, 1:100.

December 3d and 30th, 1:100.

January 26th and 28th, 1:100.

February 2d, 16th and 27th, 1:100.

Thereafter injections of the strength of 1:100 were given weekly. I hope the child will be restored to health by Spring.

I have also used injection of Thuja in the following cases:

II. Two children aged three and four, suffering from scrofulous conjunctivitis, who had been treated for a long time without benefit at the eye-clinic. After three or four injections, both could see very well; no local treatment was employed.

A woman æt. thirty-four, suffering from scrofulous ulceration of the legs, so that she was confined to bed. She received four injections which were followed by such marked improvement that I hope she will be completely restored to health in eight weeks. At rare intervals I allowed the ulcers to be treated locally with Thuja in water, after the manner of Grubemann.

IV. I am now seventy-six years old, and have been suffering for years with an affection of the lungs.

In January, 1888, I was greatly troubled with night-sweats and nocturnal cough, so that my strength became greatly reduced; examination revealed catarrhal irritation of the apex of the left lung. Medicine and dietetic treatment removed the latter condition, but an annoying night-cough remained despite all remedies. At present I have regained my strength; the right lung seems now affected rather than the left, emphysema has probably something to do with this. The early morning cough entirely disappeared after subcutaneous injection of Nux Vomica 30. There only remains a short cough after much talking, and also a cough occurring in the morning, which is accompanied by scanty expectorations, at times streaked with blood. It is remarkable that the nasal mucous membranes, which were inactive for years, have resumed their function.

V. On December 12th I was called to see a girl, æt. 12, suffering from a severe attack of laryngeal diphtheria; respiration was extremely difficult, and as the father refused to permit an operation death seemed inevitable within twenty hours.

I dissolved fifteen globules of mercurious cyanatus 30 in one

hundred drops of distilled water, and at 3 P. M., injected fifteen drops of this solution between the shoulders. During the afternoon and early part of the evening the dyspnoea was still great, but after this it gradually decreased, so that the child fell into a quiet sleep.

By the following day all the threatening symptoms had disappeared, pulse was no longer excited, and the temperature fell to 38.5. The child aided the expulsion of the membrane with the finger, and took some nourishment. As the patient lived at a great distance, I gave another similar injection as a precautionary measure.

On the third day the child was very lively, and on the fourth day was out of bed.

VI. The following day I was called to see a boy æt 6. In this case the tonsils were covered with diphtheritic membranes and there was high fever.

An injection similar to the one in the preceding case was given. The patient thereafter began to hawk continually and the membrane disappeared. On the third day the patient was going about.

In both cases Alcohol in water 1:10. was given as a gargle.

Up to the present time I have treated ten cases in a similar manner and all recovered.

Several cases now improving under this treatment will be reported later.

P. S., March 16th. Up to date fourteen cases of diphtheria have been cured by this method of treatment; the number would be still greater if the antagonism of the Allopaths could be overcome; they are compelled to resort to tracheotomy and many cases die.

Two of the cases cured were very serious; a poorly developed scarlatina complicated the diphtheria. In these cases I gave injections daily.

I sincerely hope these indications will cause many similar experiments to be made.

EXTERNAL APPLICATIONS IN HOMŒOPATHIC PRACTICE.

By the Late Dr. Hirsch.

A number of years ago I frequently drew attention in *Hirschel's Zeitschrift* to the oft times imperative necessity of using external applications in combating certain intense pathological processes.

Such cases occurred in my practice pretty frequently, and it is my belief that even the most orthodox Homœopath may have to resort to external expedients lest his patient fall a prey to his obstinacy. In cases where the pathological disturbance occurs near the surface the internal Homœopathic medication, combined with certain external adjuvants, will exert a strikingly expediting influence on the resolution of the morbid processes. We surely need not aspire to be stricter Homœopaths than Hahnemann himself, who frequently afforded prompt relief to myself and others by applying his plaster made of the resin of the larch tree.

In proof of my assertion I propose to give a number of specific cases from my practice.

CHOREA. During my practice of 46 years 28 cases of chorea, of more or less intensity, were put under my charge, and I succeeded in curing all these patients, some of them very severe, to their entire satisfaction. The lighter cases usually responded to the exhibition of *Ignatia*, *Causticum*, while in some severe cases I had to give in addition to *Causticum*, *Stramonium* and *Cuprum* to effect a cure, but finally I reached one case in which all these remedies and several others that seemed to be indicated, disappointed me altogether, and that this desperate case, finally improved, was due solely to the application of a simple external remedy.

Mr. B., owner of extensive iron works, had a son æt. 15, who, perfectly healthy up to that time, barring some minor children's diseases, had developed into a vigorous youth. About the middle of September my visit was desired because he commenced since about a week, to make grimaces at home and at school, and persisted in this in spite of all remonstrances. As a matter of course, I immediately recognized the cause and took care to impress upon the parents that this was but a precursor of a nervous affection which might involve the whole body. I also mentioned that such an affection, similar to whooping cough, often would attain a very pronounced aggravation, in spite of the most careful medication, before the symptoms would slowly abate, but that this amelioration would much sooner manifest itself under homœopathic than under old school treatment. I very seldom fail to give this information lest the family should think that the treatment pursued aggravated the case. Only in rare cases can this disease be cut short, and cured in a short time, though the remedies be given in high or low potencies and in longer or shorter intervals.

The preceding remarks were fully justified in the case, for dur-

ing the eight days following although *Belladonna 15* was exhibited daily (a dose morning and evening), on account of frequently appearing congestion to the head, no amelioration could be detected; on the contrary, the involuntary motions affected now the hands, especially during eating, rendering the use of knives, forks and spoons very awkward. After a few days the involuntary motions of the hands were also observed during the day, and *Ignatia*, which proved efficient in my hands in many similar cases, failed to retard the progress of the sickness.

Presently the night's rest also became disturbed, and the involuntary jactitation of the extremities, and even of the whole body, came to such a pass as to necessitate his transfer to a mattress on the floor, to guard against injuries from falling out of bed, etc. On this improvised bed he had lain also during the day, for while walking about he would suddenly be thrown against the wall or furniture. In spite of the most careful medication and well regulated simple diet, the disease steadily progressed, the patient finally losing speech, uttering inarticulate sounds from time to time. As a matter of course he had to be fed, but this was accomplished under great difficulties, for the moments had to be watched when the muscle twitchings involuntarily tore open his mouth, and as quickly shut it. Food had, of course, to be administered, in a liquid state.

Urine was passed involuntarily, while the bowels were constipated, necessitating frequent injections of honey-water. The organs of the chest were in a normal state, only the pulse was somewhat accelerated, owing.to the continuous activity of the muscles. Under these circumstances and the continued aggravation of the malady I could not take umbrage at the father's desire to consult an Allopathic physician, though he had for many years used Homœopathy exclusively in his household. He remarked that without my full approval no medicine was to be administered. I consented and advised to call in Prof. Steiver, physician in charge of the children's hospital. He was astounded at the violence of this *Chorea* and advised to give *Zincum*, and when informed that this as well as *Cuprum* 6 in the 5th trit. had been given he remarked that this case possibly called for stronger doses, and on this we gave *Zincum* 7 c. gr. three times a day, and as this seemed insufficient it was increased after two days to 14 c. gr. every five hours. The right arm was immediately quieted, but a thorough examination showed it to be paralyzed. *Zincum* was then immediately discontinued and *Fowler's* solution substituted, but as this caused nausea, even in minute doses, and patient lost his appetite it also had to be set aside. In all works of reference

the same remedies were advised, until finally I came across a case of high grade Chorea in a girl æt. 6, in Prof. Bouchut's excellent hand book on children's diseases, which engaged my full attention. In this case all the usual remedies had been given without success, when, as a last resort, it was decided to anæsthetize the spine with ether by an atomizer; this was followed by a surprising amelioration, followed in a few days by a complete cessation of involuntary motions, and in a very short time by a complete cure. This remarkable case I brought to the notice of the professor, who immediately sanctioned the application of this treatment. I at once procured the necessary apparatus to produce a fine continuous spray of ether, and it was applied to the bare spine of the patient for five minutes; the patient was evidently comforted. The spine was rendered icy cold, and the very next night was much more quiet. On the next day the evident decrease of the involuntary motions could no longer be doubted; he even succeeded in uttering some words, although with evident exertion. A second application of the apparatus had quite as satisfactory an effect; however, all attendants of the sick room, with the exception of the patient, complained of headaches, etc., as the effect of the ether, for the room, it being mid-winter, could not be properly ventilated. While cogitating how to overcome this difficulty, the icy coldness of the spine succeeding the operation came to mind and suggested the idea that to this low temperature was mainly due the beneficial result. In pursuance of this thought, cold water was substituted for the ether in the next application, and behold, the result was the same, to the intense satisfaction of myself and the others. Convalescence then progressed rapidly, so that in about two weeks the patient was able to walk about without discomfort, but the great weakness, especially in the extremities, it took some time to overcome. But the patient had regained full control over his mutinous muscles. Two years have now elapsed, and the young man presents a picture of perfect health, without a trace of the serious attack of sickness. —[From *Popul. Hom. Zeithung, Vol. XII.*]

CARDUUS MARIANUS.

By Dr. R. E. Dudgeon, M. D.

This plant, which was such a favorite with Rademacher, who found it an excellent remedy for acute and chronic affections of the liver, gall-stones, gastralgia, hæmoptysis, hæmatemesis,

metrorrhagia, &c., has not received so much attention from Homœopathic practitioners as it deserves. In 1882 Dr. Windelband, of Berlin, wrote an article in the *Berliner Zeitschrift*, in which he related the marvellous results that he had obtained from its employment in varicose ulcers, of which he had many cases in the practice of the Homœopathic Dispensary of Berlin. He says: "The forms that came under our treatment were chiefly fully developed ulcers of bluish or browish red color, with ichorous discolored granulations, and usually surrounded by brownish-colored dilated veins, with jagged callous borders, easily bleeding, and caused by a blow, the bursting of a varix, following eczema, rarely consequent on inflammation of the connective tissue, most frequently caused by scratching an eczematous skin. The pains were usually moderate; sometimes the patients complained of burning in and around the ulcer. The most tiresome symptom was the constant itching, which was worst when the ulcer was commencing to heal." He had been favored with large numbers of such cases, both at the dispensary and in private practice, and had had little or no success with many Homœopathic remedies, such as *Carbo Veg.*, *Bellad.*, *Rhus.*, *Puls.*, *Hamamelis*, *Graph*, *Sulph.*, *&c.* He was led to the knowledge of the healing powers of *Carduus* in such ulcers in this way: A laboring woman of middle age, who had had six children, and had to do a great deal of housework, came under his care for inflammation of the liver, which left a chronic swelling of that organ. After trying many Homœopathic remedies in vain, he as last resolved to try Rademacher's remedy. He gave the drug in a decoction of the seeds as Rademacher first directed. The liver disease rapidly improved under this remedy, and he was surprised to find that some "colossal" varicose ulcers, with which the patient had been tormented for five or six years were completely healed in a few weeks without any external treatment except the occasional and irregular employment of a simple bandage. This case led him to employ the same medicine in tincture of the seeds in his dispensary practice, and it proved so successful that of 196 cases of varicose ulcers of the legs of all varieties of degree 145 were completely cured by *Carduus* alone, though the patients, who were mostly women of the lowest class, continued to go about their work. The only external application was an ordinary flannel bandage, and when there was much burning or itching a wet compress or an oiled rag. As these chronic varicose ulcers are usually of a most intractable nature, a veritable opprobrium medicinæ even under homœopathy, and with prolonged rest on the part of the

patient, it is interesting to all practitioners to know the success that has attended their treatment by *Carduus Marianus*. Dr. Windelband gave the tincture of the seeds in the first dilution or mother tincture, five drops three times a day. I may observe that the tincture or decoction of the seeds was what was used by Rademacher and Windelband, and by Reil and Buchmann in their not very satisfactory provings. The *British Homœopathic Pharmacopœia* directs that the tincture should be made from the root and seeds, but as there is no evidence that any medicinal virtue is contained in the root it should certainly not be used in preparing the tincture.*

In the *Berliner Zeitschrift* of August last, Dr. Kunze has an article on *Carduus Marianus*, which gives us a further insight into its medicinal powers. After remarking that in the latest works on Materia Medica of the allopathic school no mention is made of this drug, and that it has rarely been used even in the homœopathic school, he says:—

"The chief spheres of action of *C. mar.* are diseases of the liver, bile and spleen, and various affections caused by derangements of this organ, such as asthma, cough, pleurodynia and local rheumatism, especially of the intercostal muscles, diaphragm and abdominal muscles; also gastric ailments, digestive disturbances, gastro-intestinal catarrh. It has a marked effect on the venous system, especially when the affection of the vessels is owing to hyperæmic state of the liver and obstructive congestion of the portal vessels, but it seems also to have a specific relation to the venous system unconnected with any affection of the abdominal organs. Epistaxis, metrorrhagia, hæmorrhoidal flux, hæmoptysis and hæmatemesis, as also various ulcers of the legs, have frequently been cured by *C. mar.*

"The first and chief indication of *Card. Mar.* is hyperæmia of the liver, of the biliary apparatus, and of the portal system, and jaundice. It is suitable for both the acute and chronic forms of hepatic hyperæmia. The symptoms that chiefly indicate its employment are: more or less distension and tenderness of the right hypochondrium, with pressive throbbing, or shooting pain on right side of abdomen, below short ribs through to spine, also extending through chest to right shoulder. Clinical experience has taught that in liver affections with great tenderness, but without swelling of liver or stoppage of bile, *Carduus* is superior to other remedies. There is present an inclination to take a deep breath, but the pains are aggravated by that and by

---

*The American Homœopathic Pharmacopœia directs that the seeds only be used.—RECORDER.

movement. In very acute cases this hepatic hyperæmia assumes the form of a bilious fever or so-called acute hepatitis, or as typhlitis, or with an array of symptoms resembling peritonitis puerperalis, or as cough with stitch in the side (false pleurisy).

"This chronic hepatic hyperæmia is often attended by chronic pleurodynia in either hypochondrium, pain in cæcal region accompanied by emaciation, dirty yellow complexion or hectic fever; sometimes hemorrhages ensue, epistaxis, hemoptysis or hæmatemysis, metrorrhagia, sciatica and intercostal myalgia. A common complication is icterus and gastro-intestinal catarrh. Indications for *Card. Mar.* are dull headache, especially in forehead or temples, confusion of head and vertigo, epistaxis, bitter, pasty, flat taste, eructations, heartburn, white tongue, especially when it is white in the centre and red at tip or sides, or only white on one side, at the same time vomiting of a sour green fluid. The stools are at first generally brown and of firm consistence, normal, neither constipation nor diarrhœa, later they become bright yellow, pappy, and diarrhœic. The urine is at first bright yellow, then brownish tinted, alkaline or acid, with a glittering scum and cloudy sentiment. The gastro-intestinal catarrh is sub-acute; there are sometimes attacks of gastralgia, the pains being contractive; at this climax vomiting, cold rising from precordium to throat, ending with a feeling of spasmodic constriction in throat. I may mention that *Card.* is sometimes useful in the vomiting of pregnant women, or such that occurs in the morning before meals, is watery and tasteless. Some recommend it in gall-stone colic, but I cannot do so.

"Melancholy as a consequence of hepatic disease is cured by *Card.* in suitable cases. There is rarely absent a cough, which is sometimes dry, sometimes with expectoration of mucus, streaked with blood or sanguineous. In the morning thick yellow sputa, and expectoration with difficulty, there are at the same time stitches in the side and evening fever. The patients complain of dyspnœa.

"Here is a specimen of a cure of hepatic hyperæmia. A woman, aged 45, of greyish-yellow complexion, who had been subject for several years to hepatic colic, had been suffering for a week from her periodical pains. They commence in the middle of the abdomen and extend thence to the scrobiculus cordis and right hypochondrium where they remain. The precordium was so sensitive to the slightest touch that she cried out, and thorough examination was impossible. An hour later, before she had taken any medicine, she got an attack of colic with very little vomiting, great dyspnœa, feeling of suffocation

and great exhaustion. This attack went off in the afternoon without medicine, and then there ensued chill and heat. When carefully examined next day, the whole right hypochondrium was found to be distended and extremely painful, with febrile symptoms, so that hepatitis might almost have been suspected. Tongue loaded, rather pasty; urine reddish-yellow, turbid, scanty and strongly alkaline. The patient got *Tinct. Card. Mar.*, 10 to 15 drops five times a day. Next day much better, completely cured after three days."

Dr. Kunze points out the similarity of the above symptoms to those obtained by Reil in his proving of the drug, which may be read in the second volume of the *Cyclopædia of Drug Pathogenesy*.

"In acute or sub-acute gastro-intestinal catarrh *Card. Mar.*, given in doses of several drops of the tincture several times a day, is so very useful that the slighter cases are removed in two days, the severer ones in five to seven days. Even chronic cases are cured in a relatively short time.

"A woman, aged 64, had been suffering for two years from anorexia, persistent nausea, frequent vomiting of food, of which she could only eat of the lightest kinds, pains in precordium and right hypochondrium. The last few months she had, in the evening, palpitation of the heart, chill lasting quarter of an hour, spasmodic drawing in calves and hands and numbness of fingers. Tongue moderately furred, steel grey, taste bitter, urine acid, bright yellow, cloudy; headache. After taking for two days some remedies which had no good effect she got *Tinct. Car. Mar.* Next day the evening attack did not come on and she felt better generally. Some hæmoptysis occurred, but that she had often had. After taking the medicine for fourteen days all her symptoms disappeared.

"In spasms of the stomach *Carduus* is superior to most of the usual remedies. If the pains are contractive, if vomiting occurs at the climax, if there is cold rising from the precordium to the throat, combined with feeling of spasmodic constriction, if there is pressive, shooting pain in the right side of abdomen spreading to the back or shoulder, one may rely on seeing good results from *Carduus*.

"Chronic hyperæmia of the spleen, and its attendant affections are not insusceptible to the action of *Carduus*. It removes the following symptoms which may be due to the spleen: chronic pleurodynia in left hypochondrium, hæmatemesis, ague and intermittent neuralgia. I have seen sequelæ of malarious and typhoid fever repeatedly yield to this medicine.

"A widow, 50 years old, who had been ailing for 10 years, complained of loss of appetite, bitter taste, constipation, tension or pain in precordium and liver. A few days ago she got a feeling of hot undulation in precordium, with anxious oppression, followed a few hours later by a black, tar-like stool mixed with blood. She now felt not only pains in the liver, for which she had been latterly taking *Quassia* without effect, but also pressure and shooting in the region of the spleen, which was swollen and tense. *Card. Mar.* was prescribed. Next day the liver pains had completely gone, but the spleen remained tender to pressure; on the 2d or 3d day she lost blood by stool, but 10 days after taking the *Carduus* there was no more swelling or tenderness of the spleen, and the patient felt better than she had done for years, while continuing to take the medicine.

"In former days *Carduus* was given for ague. Tournefort relates the following case: A young woman, aged 25, complained for a week of violent pains, which began at the right ear, passed through the temple down to face and neck, did not invade the left side and recurred two or three times a day; pain in both sides, especially in the middle. Every day, about 3 P. M., she has an ague fit, with chill, heat and sweat, lasting from one to two hours. She is weary, lies in bed, has no appetite, bitter taste, tongue thinly furred, deep yellow urine, with glittering scum and cloudy sediment. For the last six months the menses have come on every fortnight, lasting three days and generally pale colored. In the interval she has continual leucorrhœa. On account of her anæmia she got *Iron*, and for the gastric malarious symptoms *Carduus Mar.* at the same time. The ague and periodical neuralgia disappeared in a few days, and in three weeks the leucorrhœa and anomalous menstruation were cured.

"Numerous cases have occurred where *Card. Mar.* has cured pains in the hepatic or splenic region accompanied by hæmoptysis or expectoration of viscid, lumpy mucus, and evening fever. Even phthisis pituitosa and slight or severe bronchial catarrhs have been cured by it.

"A man, aged 62, had suffered for six months from cough with copious purulent expectoration in enormous masses, and for the last fourteen days had, in addition, hectic fever. He complained of shooting in the left side and pains in the chest; the left lobe of liver was painful to pressure and swollen, the tongue coated yellow. No appetite. Prescribed *Tinct. Card. Mar.* In three days the shooting pain was gone, the liver free from pain. After four weeks the expectoration had quite ceased. *Ferr. Acet.* was given simultaneously for the anæmia, and the patient was quite cured.

"Hæmorrhage from the lungs connected with hepatic disease is curable by no other medicine so readily as by *Card. Mar.* It is also of great use in hæmoptysis dependent on diseases of spleen, with swelling and shooting in that organ and relief by lying on left side. Acute and chronic sore throats, and chronic asthma when connected with hepatic or splenic derangements yield to this remedy.

"An emaciated man of 40, with a yellowish grey complexion, had suffered for several years from asthma with severe cough with more or less expectoration of thick sputa. His general health was pretty good. Auscultation revealed sibilant and mucous rales, the right hypochondrium was swollen and painful. The left lobe of the liver was most sensitive and felt hard. Moderate pressure immediately caused difficulty of breathing and cough. He was never free from asthma, the breathing always panting and the voice hoarse. Any exertion increased the dyspnœa, At night the asthma was not so tiresome as the cough, which only towards morning became loose. As the affection evidently depended on disease of the liver, *Card. Mar.* was given. In a week the patient felt better, and after a fortnight the asthma and cough were gone. The patient now left off the medicine, but as his chronic liver malady was not quite well, the asthma and cough returned. He resumed the medicine, and after going on with it for a considerable time he was not quite well, the asthma and cough returned. He resumed the medicine, and after going on with it for a considerable time he was quite cured.

"I have already said that *Card. Mar.* is a valuable remedy in various hæmorrhages; certain it is when these depend on affections of liver or spleen *Carduus* is very efficacious, but it would seem also to be a good remedy for hæmorrhages independent of diseases of those organs. Professor Rapp says it is, next to *Bryonia*, the best remedy for the habitual epistaxis of young persons having a psoric origin. I have already given examples of its power over hæmoptysis, hæmatemesis and passage of blood by stool. But it is also decidedly useful in metrorrhagia. This is often not an idiopathic affection of the uterus, but dependent on disease of the liver, spleen (or kidneys). In real affections of the liver and spleen we are not always able to find an actual enlargement of or severe pain in these organs. The previous occurrence of typhoid, intermittent fever, icterus or pneumonia may lead us to infer the existence of some alteration in the liver or spleen. This inference is strengthened by the presence of digestive derangements, disposition to diarrhœa or constipation, bitter taste, coated tongue, yellow color of temples and corners

of the mouth, muddy urine, light-colored stools, satiety, after very little food, sensitiveness of the hepatic region to pressure. In affections of the spleen or liver a peculiar complexion resembling anæmia. In a former paper I mentioned the good effects of large doses of *Bursa Pastoris* in metrorrhagia, but that *Card. Mar.* is a valuable remedy the following case will show:

"A young married lady, aged 27, who had already had two children, had suffered for eight years from frequent attacks of metrorrhagia, coming on at menstrual period. The hemorrhage lasts twelve to fourteen days, and then leucorrhœa ensues. She suffers from costive bowels, is emaciated, yellow about temples and corners of mouth, bitter taste, and is very irritable. Her last child is six years old. Various gynæcologists have examined her, and declare there is no idiopathic uterine affection, but the liver is not swollen. For the last six months she had suffered from periodic hemicrania. She has undergone much treatment at the hands of celebrated physicians in various places, but without any good result. The yellow color of the temples and the digestive symptoms point to an affection of the liver; hemorrhages attendant on liver disease demand *Carduus Mar.* She began to take the tincture on the sixth day of the discharge. After a few doses the discharge decreased, and after two days stopped completely, and no leucorrhœa followed. On continuing the medicine the next period was much less, and lasted only five days. The lady recovered her health, her complexion became normal, and her bowels regular. After a few months she declared that the 'miraculous drops' had cured her."

Dr. Kunze then alludes to Dr. Windelband's experience of the efficacy of *Card. Mar.* in varicose ulcers, mentioned above, and he then goes on:—

"It is a specific in local muscular rheumatisms dependent on liver disease. This rheumatism only attacks the abdominal muscles. It sometimes spreads to the hip and the thigh, and even down to the ankles, and there are often pains under the short ribs and in the sacrum.

"A married lady, aged 34, who had been confined four weeks previously, during her convalescence, got an affection of the peritoneum, with tearing, shooting pain on both sides of abdomen, sometimes concentrated in the center of the abdomen, where it gave her much pain on taking a deep breath. *Card. Mar.* in three days completely removed this rheumatic affection of the abdominal muscles.

"These abdominal pains accompanying liver affections may be so violent as to make us suspect peritonitis, but their rapid cure by *Card. Mar.* shows that this was not the case.

"A widow, aged 30, of greyish yellow complexion, complained of continued severe pains in the center of the abdomen, especially severe in the right mesogastric region. On pressure, or on the slightest touch of this part, which was hard and distended, the pain was very violent. Loss of appetite, tongue slightly coated, considerable fever. After taking *Card. Mar.* for three days all the symptoms disappeared.

"The following case will show its power in rheumatic affections of sacrum, hip and thigh: A woman, six months pregnant, complained of violent pains in the right hip, which extended to the middle of the thigh and ran down to the ankle. Along with them was violent sacral pain. She can only crawl along, limping and dragging her leg. The pains are particularly violent on rising from a seat and become gradually slighter on walking. Under the right short ribs she feels a slight tenderness on pressure, but no pain. After a week of *Tinct. Card. Mar.* she was completely cured of her rheumatic ailment."

I have frequently employed with advantage the tincture of *Card. Mar.* in cases of congestion of the liver, but from Drs. Kunze's and Windelband's observations it seems to have a much more extensive sphere of action than it has hitherto been credited with, except by Rademacher, to whom indeed medicine is chiefly indebted for a knowledge of its therapeutic virtues.—*Monthly Hom. Review.*

CACTUS GRANDIFLORUS.

Having used the *Cactus Grand.* in my practice the last ten years, I will give you my experience and its therapeutical effect upon the system. * * * * *

℞ Ten to twenty drops in four ounces of water; dose, teaspoonful as often as necessary.

I get better results from it by giving it in small doses and often, till we see its physiological effect. I use it in all forms of heart diseases, either organic or functional, when the pulse is accelerated, *but never* in a slow pulse. It is sedative in action, reducing the pulse and giving strength to the heart's action. Thus where we have a feeble pulse—80, 90 or 100—it will relieve the heart's action, and give it tone or strength. It is also antispasmodic when there is tightness in the chest, difficult breathing, inability to walk fast or walk up stairs, soon get out of breath, in a severe attack of angina pectoris, when the patient

wants all the doors and windows open—in such cases it will give prompt relief.

In all cases we have observed that there is difficult breathing in either organic or functional diseases of the heart; the feet, hands and body are cold, indicating an unequal circulation of the blood—too much blood in the heart and lungs, and not sufficient in the extremities, hence the oppression and *coldness*. The Cactus, given in small and frequent (every ten to fifteen minutes) doses, will, in a reasonably short time, remove the difficult breathing, and the hands and feet, as well as the body will soon get warm. This I have time and again observed at the bedside.

Then it must be not only an anti-spasmodic, but a stimulant to the capillaries and nervous system. I employ it in many forms of heart disease, whether functional or organic, such as palpitation, pericarditis, endo-carditis, hypertrophy, atrophy, angina pectoris, and valvular insufficiency. Thus, if we prescribe the Cactus, when indicated, given in small and frequently repeated doses, we will never be disappointed; but if you give it in large doses at long intervals you will always be disappointed.

It is also a fine remedy in rheumatism of the heart, as I find after having used it in a number of cases. I alternate it with tincture Cimicifuga racemosa in similar doses. It gives the patient prompt relief. I perfer to give the Cactus alone, though in all cases we must give such other remedies as are indicated. Cactus, properly prescribed, will cure *all* functional diseases of the heart, and ameliorate many organic affections and diseases of that organ.—*John A. Henning, M. D., in Medical Summary.*

Whooping Cough.—It has frequently been observed that in whooping cough epidemics a remedy meeting a majority of cases in one year will often fail of being effective in another. Thus *Naphtalin 3* was *the* remedy during one epidemic, while during the next *Camphora* did the work and during a third *Belladonna*. This was followed by a epidemic wherein *Coccus Cacti*, 1x trit., met almost all cases. This is one of the old Rademacherian remedies, and about one drachm of this was dissolved in four ounces of sweetened water and three teaspoonfuls were given daily, amelioration set in at once and the cure was generally completed within five days.—*Popul. Hom. Zeitung, Vol. XII.*

Symphitum Off.—An old and very valuable remedy. This plant is found all over Europe (and in some parts of North

America), in wet fields and ditches. We make a tincture out of it which has marvelous healing and cicatrizing properties. *Symphitum* must be a very old popular remedy; its reputation is well established, and it is mentioned in all the old medical "tomes." The decoction acts as an effective demulcent and pain-killer in severe bruises. It diminishes the irritation in wounds and ulcers, ameliorates and lessens too copious suppuration and promotes the healing processes. In homœopathic practice the tincture diluted with water is used with great success in fractures and bruises or other injuries of bones. Its effect is really extraordinary in injuries to sinews, tendons and the periosteum.

A few days ago a colleague consulted me about a horse with a stab wound in the fetlock which would not heal, do what he would, and which rendered locomotion impossible. (The doctor is by no means a young or inexperienced veterinarian.) I examined the wound, and at once recommended *Symphitum θ*. Within two weeks the animal was cured. This remedy really cannot be overestimated.—*Dr. Gottweis in Pop. Hom. Zeitung, Vol. VII.*

The Danger of Unboiled Milk.—Many people have a rooted objection to the taste of boiled milk, and, as a matter of fact, that liquid is generally drunk unboiled. The public will, perhaps, be more inclined to depart from the beaten track when they read of the following case brought to the notice of the Académie de Médecine by M. Ollivier, one of the physicians of the Hôspital des Enfants Maladies. Clinicians are moving heaven and earth to exorcise the ogre tuberculosis, and, in our anxiety to discover an antidote for the ravages of the terrible bacillus, we are apt to forget the old adage, "prevention is better than cure." The case related by M. Ollivier was that of a young lady aged twenty, whose family and personal health antecedents were excellent, but who had the misfortune of being brought up in a school where, in the space of a few years, six out of thirteen girls had fallen victims to tuberculosis, two being cases of tabes mesenterica. The young lady succumbed rapidly to tuberculous meningitis. An examination of the udder of the cow, which had for nine years supplied the school with milk, was, after death, found to be the seat of extensive tuberculous lesions. M. Mocard emphasized the contention of M. Ollivier

that unboiled milk should be banned, however healthy the cow yielding it may appear, by relating how the lymphatic glands of a calf in seemingly excellent condition, which, to the great disappointment of its owner, had died after a few days' illness, had been found stuffed with bacilli. A short time afterwards the mother of this calf—a fine beast, to which had been allotted numerous prizes—died in her turn, and the udders, lungs, and lymphatic glands were discovered to be tuberculous. The lesson taught by these two interesting communications is plain: avoid unboiled milk.—*Lancet, March 7th, 1891.*

If people would use the Romans-horn brand of sterilized milk they would avoid this danger. It is a pure Swiss milk highly condensed and preserved by the stirilizing process, contains no chemicals or other added substance. The following government analysis from the laboratory of Melbourne, Australia, is apropos:

MELBOURNE, 24th April, 1882.

I have examined the condensed liquid milk of the Romans-horn Milk Exporting Company; it is simply good ordinary milk concentrated by careful evaporation at very low temperature to one-fourth of its bulk. Thus, one quart of the liquid condensed milk mixed with three quarts of water will produce four quarts of good, honest ordinary fresh milk. This preparation having had no additions made to it in the shape of sugar, as is always the case with the ordinary condensed milk contained in tins, has many advantages, sugar often seriously interfering with many of the uses of milk, especially in cooking.

(Signed) WM. JOHNSON, *Analyst.*

Rhus Aromatica —Recently, by the advice of Dr. J. S. McClanahan, of Booneville, Mo., I have treated this disease [*Diabetes mellitus*] very successfully with *Rhus Aromatica*, in doses of gtts. 30 of the tincture, given every two or three hours through the day. One of my first patients was an old man, some 74 or 75 years of age, who was very weak, and was passing a large quantity of urine, the specific gravity of which was 1040. Upon evaporation upon a slip of glass, over a lamp or candle, this yielded a large percentage of molasses. I put this old gentleman on *Lycopus* and *Nitrate of Uranium*, which treatment he continued a month; it reduced the quantity of the urine, but not the quantity of sugar. I then put him on *Rhus Aromatica*, three times a day, which he continued for one month, with a

great decrease in the quantity of urine and sugar. I now took the specific gravity of the urine and found it to be 1032. I continued the prescription another month, at the end of which he appeared to be much better, and said he felt well. He was gaining flesh and strength rapidly, and I advised him to continue the treatment another month; at the end of this time he reported himself perfectly well, and so continues up to last accounts. The *Rhus* is reported to be as good in diabetes insipidus as in diabetes mellitus. * * * The old gentleman had been visited by two of his brothers, both old and reputable physicians, both of whom pronounced his case incurable.—*Goss. Practice of Medicine.*

Calendula.—The other day I was told by a friend that he had, last autumn, chewed a *Calendula* leaf for a few minutes; the effect was most marked and very striking. It entirely removed for some days the difficulty in making water, with which he had long been troubled, and which is so common in elderly people. I have a suspicion myself that *Calendula* affects the spinal chord, from certain unpleasant feelings which I have when making it from the fresh plant.—*C. W., in the Hom. World.*

To the foregoing the editor of the *World* appends the following note: In response to our request for a fuller description of these feelings our contributor replies that the symptom was very difficult to describe. "There was such a feeling as if some overwhelming calamity was hovering over me as to be almost unbearable. Three years ago, just after making the tincture, my old enemy, the gout, nipped me in the middle of the spine, and in three days spoiled all my powers of walking; and then the dreadful feeling became very much exaggerated."

Sambucus Nigra.—This old remedy has had a revival by the pen of Dr. Georges Lémoine in the *Gazette Medicale* of Paris. He principally employed it in nephritis, especially in the acute congestive form; its action then being more rapidly produced than in chronic Bright's disease. The first case he cites was that of a woman, 32 years of age, who, as a consequence of improper use of a catheter, acquired cystitis and ascending infectious

nephritis. There was considerable anasarca, the peritoneum and pleura contained liquid, and the patient was in danger of dying from œdema of the lungs. After the first day's use of the remedy the urine nearly doubled, while on the fourth day nearly ten times as much urine was passed as at first. The anasarca rapidly diminished, and it was not until the cellular tissues were entirely free from effusion that the quantity of urine and the number of diarrhœic stools were reduced.

Two other cases also of acute nephritis are given in which the results were satisfactory, but in six cases where nephritis was of long standing the effects were less apparent. Dr. Lémoine states that in the œdema, in consequence of heart disease, the elder will likewise in the majority of cases produce improvement through its action on the kidneys and the intestine.

Stitca Pulmon. in Measles.—When the acute symptoms of measles have subsided, and the case is approaching convalescence, appetite is returning, and all signs point to a happy termination of the disease; a most troublesome complication often arises in the shape of a cough, which fails to respond to the ordinary remedies for bronchial affections. In the treatment of this condition I am indebted to Dr. W. C. Goodno, of Philadelphia, for the use of a remedy which has given me most satisfactory results. I refer to *Sticta Pulmonaria*. I am not familiar with the pathogenetic qualities of this drug, and cannot therefore explain its action in this connection. I only know that it "gets there" with great promptness and uniformity, and it is this knowledge which recommends it to my favor. Cases of this character, which might result in chronic bronchitis, or even threaten incipient consumption, yield to this remedy so speedily and so kindly, that I feel justified in according it the highest praise.—*Douglas Caulkins, M. D., in S. J. of Hom.*

Somnambulism.—Percy W., aged fourteen, nervous temperament. Has been troubled for the last three years by dreams and sleep walking. On one occasion he had got up, dressed, went into the yard and split wood for some minutes. Being watched, at the time, by his family who were awakened by the noise.

When aroused he merely said he had been dreaming of splitting. wood. He asked why he had been brought down stairs and into the yard. His last adventure was more serious, he got up and walked out of an open window, falling fifteen feet to the ground. He gave one cry (which awakened his mother) and started for the stable on the opposite side of the road. He was overtaken and, when fully awake, declared that he was going to hitch up the horses and go to town; that he had felt sick and was going to see the doctor. He insisted that he had not been asleep and had come down stairs in the old-fashioned way. His parents found his head badly cut and arm injured. On examining head I found a Colles's fracture. After dressing the wounds I put him on *Bryonia*, 3x trit., one powder at night. The dreams gradually grew less, until at the end of five weeks he slept easily and naturally. A year has now gone and he has had no dreams, nor has he walked in his sleep for eight months.—*Dr. M. G. Violet in Medical Current.*

ASARUM CANADENSIS.

I was called in haste on the night of December 29th, 1890, to see Mrs. P., a married woman, and her child, aged about seven years. On arriving at the house I found them suffering from some strange form of poisoning. On inquiring as to whether any poisonous substance had been taken I was told that the mother, thinking she was suffering from amenorrhœa, had prepared a decoction from what she supposed to be the root of wild ginger, or *Asarum Canadensis*, and had taken a considerable quantity of the liquid. The child had also taken some of it with the hope that it would relieve a "bad cold." The symptom which the mother presented was intense pain in the mouth, throat, stomach, and bowels, which was continuous and burning in charactor. The face, hands, and the lower third of the forearm had the sensation of a thousand small sharp needles piercing the flesh in every direction, and there was also a great deal of burning about the wrists. The strangest symptom of all, however, was the eruption which was present. The skin of the face and all the subcutaneous tissues were much swollen, so that one eye was entirely closed and the other eye nearly so. The eruption resembled erysipelas, for the skin was red, thickly covered with pimples and vesicles, while scatttered among these were several blisters of considerable size. The eruption was also present about each knee, cover-

ing a space as big as a hand, being chiefly confined to the popliteal region. In other portions of the body small pimples dotted the skin, and a few vesicles could be found here and there. I forgot to mention that the hands and fingers were much swollen, sufficiently so to make the fingers stand wide apart.

The constitutional symptoms consisted in frequent rigors, accompanied by a fever of about 101°; the pulse was 122 and weak. There was a good deal of nausea and some vomiting. During the remainder of the attack there were considerable swelling, pain and heat about the anus, and these symptoms were still more marked at the vulva; the labia majora, the nymphæ, and the vagina were greatly swollen, while the burning sensation caused a constant desire to urinate, although micturition was very difficult and painful.

The little girl's symptoms were identical with those of her mother except in degree, all of them being of a milder type, as she had not partaken so freely of the decoction. Another child, who had taken a very small quantity of the liquid, had the same eruption over its body.

The patients made a good recovery, although convalescence extended over three weeks.

I am altogether ignorant of the effects of wild ginger, except the account given in our different dispensatories, and if any of the readers can give me any information in regard to the use of wild ginger I shall be glad to hear from them. Is wild ginger poisonous? and if so, would it be likely to produce such characteristic symptoms? The husband of the woman gave me some of the roots, which had been collected last fall. They were from two to four inches long, varied somewhat in size, but averaged about the diameter of rye-straws. They were crooked and knotty, very brittle, and gave a pleasant, aromatic taste when chewed, which closely resembled that of cardamom.—*Dr. James Mitchell, M. D., in Medical News, March 7, 1891.*

Miss Boreton: You appear absent to-night, Mr. Wentman.

Wentman: Do I? A mere optical illusion, unfortunately, ma'am.

An Irish doctor recently reproved a friend for his too liberal use of brandy. "Bah!" said the latter, "I've drank of it since I was a boy, and I'm 60." "Very likely," replied the doctor, "but if you'd never drank of it perhaps you would now be 70."

VETERINARY DEPARTMENT.

OEDEMATOUS ERYSIPELAS IN CATTLE.

This affection I observed rather frequently last spring. It appears as a flat swelling, more or less extensive, becoming thinner towards its periphery; of considerable warmth and more or less painful, which, stretched superficially, retains the impression of the finger. Among many I selected the following from my case-book:

Cow 12 Years Old: Erysipelas of the head and bag; temperature of the head very high, on the bag the nodules looked as if pressed in; poor appetite, swallowing is difficult, pulse accelerated, heart beat barely perceptible. Prescribed *Belladonna 1*, 16 drops in ½-pint of water, to be divided into four doses within 12 hours. On the following day was quite well.

Cow 3 Years Old: Cow six months heavy with calf, and a heifer one year old, both had erysipelas of the vulva. The parts were much swollen over their entire extent, very red, both animals in striving to rub their hind-quarters and by vigorous movements of the tail, showed itching pains. Treatment, *Belladonna 1*, 16 drops in ½-pint of water. Next day cured.

Ox 6 Years Old: Erysipelas of the front region of the neck, poor appetite, slimy mouth, swallowing somewhat impeded, audible breathing, sluggish stool. Gave *Bryonia θ*, 8 drops in ½-pint of water in three doses during 24 hours. Gentle friction of neck and careful covering of same. Next day considerably improved; prescription repeated, on the fourth day quite well again.

Ox 10 years old: Erysipelas of lower belly and both hind-quarters—general condition not much affected Gave *Bryonia θ*, 12 drops in 1 quart of water to be given in 6 doses during next two days. On third day lessening of the swelling all over, lays down again that night. Now a dose of Sulphur *θ* and full recovery in a few days.—*Dr. C. Boehm, of Anod, in Bolle Pop. Hom. Zeit.*

Horse, Fistula in Cartilage.

Black stallion 14 years old in the stables in W. stood lame since over 25 weeks and the veterinarian had declared him incurable. I was induced to examine the horse and give my opinion. The animal was very much fallen off in flesh, was very lame on left foreleg, and on inner side of the crown of the hoof

there was a cartilagenous growth as large as a man's fist with three fistulous ducts secreting a thin stinking matter, the sound penetrated 1½ inches. It was a cartilagenous fistula. I offered to cure the horse within six weeks provided it was transferred to my own stable. But they would not listen to the proposition and wanted to sell the horse; as it was a very beautiful animal I bought it. On November 4, it was brought to my stable, very lame on account of the long march. I cut off the old deadened horn and endeavored to facilitate the flow of matter, then bound up the wound and thickened cartilage with tow moistened with a solution 1 gr. of *Arsenicum* in 4 oz. of water. The hoof proper was enveloped in cowdung. This was done twice a day. Inwardly I gave every morning a dose of *Arsenicum 6*. On November 11 the suppuration had greatly lessened, the matter had more consistency and odorless, the lameness is better. Up to November 15th the external application of *Arsenicum* was continued and every other day a dose of *Arsenicum* administered. On the 16th the supperation had ceased, and the dressing was taken off. Only the hoof and the cartileageneous excrescence were rubbed with a bland ointment. The horse was shod and on December 20th I rode it when not a trace of lameness was noticed. The enlarged crown of the hoof was gone in three months and I used the horse for three years and then sold it for a good price. Of a surety Allopathic vets. are sorely vexed by such cases, they operate, they burn, use escharotics, but all to no purpose, the horses remain crippled.—*Dr. L. Mœnch, of Arnstadt, in Ibid.*

Horse, Lockjaw.

On February 13th a landed proprietor wrote to inform me that he had a horse which could not eat well, its tongue was swollen and inflamed. I sent him *Belladonna 3*, one dose to be given every four hours. On the 16th I journeyed to see the horse; there was no doubt it was a case of trismus. It was a gelding, 12 years old, he stuck out his head and neck, tail elevated, the nostrils formed triangles; out of the mouth ran a tough saliva; mastication was difficult, the jaws could be separated about an inch. The muscle of the neck and sacrum were tense. Dung and urine were voided regularly, the former somewhat hard and small; pulse was small; walk stiff and tense; had a little appetite but could drink only bran in water. I had the horse well rubbed with straw whisks and covered with double blankets and gave him *Nux V. 6*, a dose every two hours, on the 15th to 17th a dose every two to four hours and twice a day he was well rubbed off. On the 15th a good transpiration set in which we kept up.

On the 18th the trismus was considerably less, could eat much better, but it had not lain down since the sickness commenced. *Nux V.* is now given twice a day. On the 26th the horse laid down again and but little of the trismus could be noticed. *Nux V.* twice daily, and on March 3d the horse was fully cured.—*Dr. L. Mœnch, of Arnstadt, in Ibid.*

Horses.

Glanders Cured : On May 25th Carter Kneisel, from Goobsdorf, came to me and informed me that by order of the Royal District Veterinarian of Schéerberg, three of his horses had been killed, having been afflicted with glanders and worm-disease ; that he had three more awaiting a like fate if amelioration should not set in within two weeks. As he begged me to examine the horses, I went to Goobsdorf and found three middle-aged horses affected with a suspicious coryza and with worm-disease in the highest stage. On my assurance that there was some hope, the district veterinarian permitted me to try, and within six weeks the horses were all right.—*Dulcamara* and *Arsenicum* were the remedies I used.

On February 18, 1853, I was requested by teamster Jabelt, from Werdau, to examine and treat six horses which had been declared to be glandered by the district veterinarian. I went to Werdau and found that several of the horses were glandered and had the worm-sickness, and that the rest had suspicious symptoms. After a four-weeks' treatment all of the horses were declared to be sound again. *Dulcamara* and *Arsenicum* were the remedies. With these two remedies I succeeded in curing, during my sixteen years of veterinary practice, more than twenty-five undoubted cases of glanders and worm-disease.—*Dr. Kunz, Veterinarian in Romeburg Bolle Pop. Hom. Zeitung.*

Stringhalt.

E. Stanley, the Government veterinary surgeon of New South Wales, has the following opinion as to the cause of stringhalt in horses: "I therefore still maintain that the disease is helminthiasis, that is, caused by worms. It will be remembered that I reported at some length on this disease in July, 1886; since then I have seen the same affliction at Moama, on the Murray River, in 1887, and again at Moss Vale this year, therefore I am able to confirm my opinion as to the parasitic origin of the disease. It is caused by worms infesting the mucous membrane of the horse's digestive organs, especially the intestinal canal, where, by setting up irritation of the bowels, they disturb the nervous system, thereby affecting the nutrition and action of certain sets

of muscles, producing inordinate contraction whenever the animal moves; this I attribute to perverted nervous action, which is possibly aggravated by deterioration of the blood, produced by the ever-increasing myriads of parasites; they are biting, perforating, and bleeding, like leeches, the highly sensitive mucous membrane during the whole time they are the tenants in possession; they not only deteriorate the blood by altering its constitutents, but I believe they also, by virtue of their excretion and debris, eliminate toxic material, which being absorbed into the circulation may assist in producing the disastrous effects on the nervous and nutritive systems which are so characteristic of this affliction. In stringhalt parasitic worms are found in countless numbers, and of several distinct varieties, in the large and small intestines, invading their tunics, making innumerable sores, ulcers, and abscesses, accompanied by the products attending chronic inflammation; thus paralyzing peristaltic action, they interrupt the natural nutritive functions of these important digestive organs; they are so overcrowded and voracious that they actually bore right through the bowels, and some are found as wanderers in the muscular walls of the abdomen; they stray about to become finally encysted in various places, and die; their debris creates still further trouble."

Chicken Cholera.

In regions where the inhabitants are afflicted with Asiatic cholera there has frequently been observed a remarkable sickening of dogs, cats, and even of fowls. At the time of the recent invasion of this scourge it showed itself in every town and surrounding country, and created great devastation in the poultry yards. Vomiting, diarrhœa, cramps in the legs and rapid sinking of strength were the most prominent symptoms. *Veratrum album* 3, administered in the very beginning, proved to be a most excellent remedy.—*Hom. Zeitung*.

How Veterinarian K. Became a Homœopath.

Having just completed a professional visit at Mr. K.'s I chanced to see quite a number of bottles of Homœopathic preparations on a desk, among which *Thuja θ* was conspicuous. "What do you use *Thuja* for?" I asked. "To remove warts," was the answer; and as a living example he introduced me to his grown daughter, who had been almost deformed by them. "With this remedy I also cured veterinarian K. from his prejudices against Homœopathy, so that until his death he was one of its most enthusiastic and useful adherents, far and near. K. one day visited my cow stable while I was engaged in painting

two large warts on a cow's leg. Curious to learn this new procedure he asked for instruction, and soon became convinced of the effectiveness of this to him new treatment. This first success induced him to further investigations, and especially the specific action of *Plumbum acet. 3x tril.* in colic, made of him a convert." I was much interested to find that my patient, Mr. V., found this remedy all sufficient in 99 out of 100 cases of colic in horses. He places a quantity, the size of a pea, on the horse's tongue as soon as it is taken sick, and repeats the dose every ten minutes, prolonging the intervals as amelioration is manifested. Our Vet. K., with characteristic enterprise, made hundreds of powders of this remedy and sold them as "colic powders" to owners of horses. *Plumb. acet.* is especially indicated when the colic is accompanied by constipation.

As to *Thuja θ* in warts I would yet remark that Mr. V. carefully pares with a sharp knife the horny skin of the wart without, however, drawing blood, similar to paring of a corn, thus providing a fresh absorptive surface, and this ensures success, for although *Thuja* is an old-time remedy for warts, yet the horny covering in many cases prevents resorption and this is at the bottom of most of the failures.—*Dr. G., Jr., in Pop. Zeitschr. fur Hom:, Vol. IX.*

BOOK NOTICES.

A Treatise on Diseases of the Eye; for the Use of Students and Practitioners. To which is added a Series of Test Types for Determining the exact State of Vision. By Henry C. Angell, M.D. Seventh edition. Rewritten and enlarged. Otis Clapp & Son, 1891. 357 pages. 8vo., Cloth. $3.00.

The sixth edition of Dr. Angell's favorite work on the eyes, issued in 1882, was long since exhausted and the present, enlarged and improved edition will doubtless receive a hearty welcome, and meet with a rapid sale. The general trend of the book is shown in the modest preface to the present edition, and we quote it entire: "The present edition is mostly re-written, and is more fully illustrated than its predecessors. It is also favored with contributions from my friend, Dr. F. Park Lewis, of Buffalo, N. Y. His articles are placed in brackets and marked by his initials. As in former issues, the aim has been to make

the book suitable for the use of physicians in general practice." Homœopathic medication does not occupy a very prominent position in the treatments, but in chapter twenty-two a list of remedies "which have been administered from indications furnished by the eye alone," and have "repeatedly cured," is given; it is a valuable part of the book. The general appearance of the work as regards paper, printing and binding is very good.

The Diseases of Personality. By Th. Ribot, Professor of Comparative and Experimental Psychology at the College de France. Authorized translation. Chicago. The Open Court Publishing Co., 1891. Cloth. 157 pages. 75 cents.

This book is divided into an introduction, four chapters—Organic Disorders, Emotional Disorders, Disorders of the Intellect and Dissolution of Personality—and a Conclusion. From the latter we will quote a paragraph and if the reader wants to follow M. Ribot he can get the book. "The unity of the ego, consequently, is not that of the one-entity of the spiritualists which is dispersed into multiple phenomena, but the co-ordination of a certain number of incessantly renascent states, having for their support the vague sense of our bodies. This unity does not pass from above to below, but from below to above; the unity of the ego is not an initial, but a terminal point." Again, "the consensus of consciousness being subordinate to the consensus of the organism, the problem of the unity of the ego is, in its ultimate form, a biological problem. To biologic pertains the task of explaining, if it can, the genesis of organisms and the solidarity of their component parts."

Advice to Women Respecting Some of the Ailments Peculiar to their Sex. By J. Adams, M.D. Toronto, 1890. 81 pages. $1.00.

This little book is addressed to women and is a plea for the use of the constitutional remedies of Homœopathy in "female complaints" in place of "the prevalent abhorrent local applications * * * I do not mean to assert that local examinations are never requisite, or that local interference is always injurious, but I do maintain that the Constitutional Treatment is far more successful in the majority of female ailments, and that the local applications so generally employed are repugnant to the best feelings of women, besides being rarely, if ever, of lasting benefit." The advice given is excellent but the book is entirely too high priced, for the American market at least.

A Guide to the Clinical Examination of the Urine. By Farrington H. Whipple, A.B., (Harv.) Damrell and Upham. Boston. 206 pages. Cloth, $1.50

"It has been my aim," says the author, "in writing this little book merely to condense the essential features of larger and more diffuse works, and thus to present the subject in a more readily accessible and practical form." From this a general idea of it may be formed. As a means of diagnosis the urine does not stand high, and a diagnosis by it is made "chiefly by exclusion." "It becomes possible only by the application of the above principles to say of an unknown specimen, 'It probably belongs to this disease, *because*, on the whole, it cannot belong to that.'" Those who like things boiled down will probably welcome Mr. Whipple's book.

Koch's Remedy in Relation Specially to Throat Consumption. By Lennox Browne, F. R. C. S. Illustrated by Thirty-one Cases and Fifty Original Engravings and Diagrams. Lea Brothers & Co., Philadelphia. 114 pages. Cloth, $1.50.

This book is divided into six chapters treating of the clinical history of laryngeal tuberculosis, histological features, rationale of the treatment as interpreted by the clinical phenomena, indications and contra-indications for adoption of the remedy, general directions for treatment and reports of cases. The author believes in "lymph" and those who agree with him on this point will find the book of value. The paper and press work are very fine. A few of the illustrations are in two colors, showing the bacilli as they appear under the microscope.

The Year-Book of Treatment for 1891. A Critical Review for Practitioners Medicine and Surgery. Lea Brothers & Co. 480 pages. Cloth, $1.50.

The *year-book* is divided into twenty parts, each consisting of a paper by one of the twenty gentlemen whose names appear on the title page. The first paper is by J. Mitchell Bruce, M.D., of Brompton, England, on "diseases of the heart and circulation." A rough calculation of "authors index" shows that nearly twelve hundred writers are quoted. The "Index to Subject" is very complete and would be handy to one who wanted to hunt up any particular branch. The whole work may be termed Scientific Medicine up to Date, and any one who wants a birds-eye view of the field of that medicine can obtain it in this well edited book.

Essentials of Surgery. Together with a Full Description of the Handkerchief and Roller Bandage. By Edward Martin, M.D. Instructor in Operative Surgery, University of Pennsylvania. Fourth Edition. Revised and Enlarged. W. B. Saunders. 1891. 334 pages. Cloth, $1.00.

This is No. 2 of the well-known "Qustion-Compend" series and the fact of a fourth edition shows that it must have merits. Like the others of the series it is arranged in the question and answer form.

"Stoop and Round Shoulders: Their Relation to Chest Expansion and Phthisis Pulmonalis," is the title of a pamphlet received from Dr. E. R. Snader, of Philadelphia, Pa.

"Crude and Infinitesimal Doses," is the title of a fine little missionary pamphlet from Dr. Henry Sheffield, Nashville, Tenn.

Pamphlet received from Thos. W. Kay, M. D., of Scranton, Pa., *A Study of Sterility; Its Causes and Treatment.*

"Personal Observations of Koch's Bacilli. Summary of Fifty Cases," is the title of a pamphlet from the pen of J. P. Rand, M. D., Worcester, Mass.

IN PREPARATION FOR THE PRESS.

A Primer of Materia Medica. An Introduction to the Study of Pharmacodynamics and Homœopathic Therapeutics. By Timothy Field Allen, M.D.

This work is to be a companion volume to the recently issued *Bœninghausen's Therapeutic Pocket-book*, and Dr. Allen's name is a sufficient guarantee that it will be a distinct and valuable contribution to Homœopathic literature. The title happily forecasts the nature of the promised volume—one dealing with the primary facts of the materia medica, a book for students and a pocket companion for the practitioner. It is hoped that the new book will be ready for delivery next autumn.

A Homœopathic Bibliography of the United States from the Year 1825 to the Year 1891, Inclusive, containing alphabetical lists of Homœopathic Books, Magazines and Pamphlets. Also, condensed statements, data and histories of

the Societies, Colleges, Hospitals, Asylums, Homes, Nurse Schools, Dispensaries, Pharmacies, Publishers, Directories, Legislation, Principal Books against Homœopathy, and Homœopathic Libraries. Carefully compiled and arranged by Thomas L. Bradford, M.D., Philadelphia, Pa.

A short time ago an inquiry was sent in to Messrs. Boerick & Tafel's Arch street pharmacy, Philadelphia, as to whether Hahnemann's paper or pamphlet on coffee had ever been translated into English, and for such general information on this point as might be attainable. The inquiry was sent to Dr. T. L. Bradford, partly for the sake of getting the desired information and partly to test the fulness and comprehensiveness of his *Bibliography*. In a few days the following answer was received:

"**Hahnemann on Coffee.**"

"1803. Der Kaffe uber seinen Wirkungen. Dresden. Arnold."

"1824. Traite sur les effets du cafe. Traduit par E. G. de Brunnow. Dresden."

"1827. Kaffeen i sine virkinger. Copenhagen. Trans. by Dr. H. L. Lund."

"1829. Trans. into the Hungarian."

"It was published in the *American Journal of Homœopathia*, Philadelphia, 1834. In the *Homœopathic Examiner*, in 1840."

"1875. A treatise on the Effects of Coffee, by Samuel Hahnemann. Translated by W. L. Breyfogle, M.D., Louisville, Ky. Bradley, Gilbert & Co., 1875. 8vo. pp. 35."

"In the Lesser Writings, Trans. by Dudgeon, New York, 1852, on page 391, may be found the article on Coffee, translated from the 1803 pamphlet."

From the foregoing it will be seen that Dr. Bradford's work promises to be one of great practical value to real students, as well as historical value. It is not a subscription book, but subscribers sufficient to cover cost must be received before the publication can be undertaken. The price of the work cannot be definitely determined yet, but publishers will guarantee that it will not exceed three dollars and, when published, will not be put on the market at reduced rates. Address subscriptions to BOERICKE & TAFEL, PHILADELPHIA, PA.

Blatta Orientalis.—*Blatta Orientalis* 6x in a case of asthma, that had been treated by half a dozen, has had more relief from it than from anything he ever used. Has taken it for six weeks and is almost free from the asthma. I think it is a success.—*Extract from letter from D. P. Perry, M. D., Trumansburg, N. Y.*

Homœopathic Recorder.

PUBLISHED BI-MONTHLY BY

BOERICKE & TAFEL,

1011 Arch Street, Philadelphia, Pa.

9 North Queen Street, Lancaster, Pa.

SUBSCRIPTION, $1.00 PER ANNUM.

Address communications, books, etc., for the Editor to E. P. Anshutz, P. O. Box 921, Philadelphia, Pa.

DR. HERBERT BEALS sends us a copy of the *Buffalo Evening News*, dated April 22d, containing on the first page an article of considerable interest to Homœopaths in all parts of the world. The headlines read as follows:

"Antipyrin and Death. Death Records Show a Strange State of Affairs. Two Methods of Treatment. The Allopaths Have Lost 63 Cases of Lung Troubles, in this City, in a Week—the Homœopaths 2."

The article opens: "'There's a queer thing about this epidemic, which is that the Allopaths are losing all the cases,' said an over-worked undertaker to a *News* reporter yesterday afternoon. Continuing, the undertaker said: 'We've been rushed to death for a month and we haven't buried a Homœopathic victim of grip or pneumonia yet. If you doubt what I say, go and look up the death certificates.'" On this hint the reporter acted and found the truth to be as the undertaker had stated, and "the Registrar looked very uncomfoitable as he aided the reporter in his task, for the city government's Health Department is Old School." Pursuing his search the reporter looked up Dr. S. N. Brayton and propounded the conundrum: "Why are the Homœopaths apparently so suceessful?" and received the cool and incisive reply from the doctor: "They are not apparently successful they *are* successful." He also said that he and Dr. Mosely, had been crowded with epidemic cases for a month, but had not lost a case, and that the other Homœopathic physicians of the city had been equally successful. "The Allopaths" he added "are killing their patients off like sheep with antipyrin, antifebrin and other depressents." Right on the heels of this appeared a despatch from New York City to the *Evening Telegraph*, of Philadelphia, showing that the success of the Homœopaths, and the failures of the Allopaths, in treating the epidemic were similar in that city to what they are in Buffalo.

There can be no doubt but that a similar state of affairs exists wherever *La Grippe* has appeared.

Do not forget that on Tuesday, June 16, 1891, the forty-fourth session of the American Institute of Homœopathy opens at Atlantic City, N. J.; also, at the same time and place, that the quinquennial International Homœopathic Congress will hold its fourth session. This meeting promises to be a memorable one in the annals of Homœopathy, and no physician of the true faith, or friend of the same, should be absent from it. Atlantic City is well worth a visit, being a city by the sea in fact as well as in name; its progress every year is of a nature to surprise even its annual guests. Within an easy day's ride of the place of meeting, from Washington and Maryland on the south, to the New England States on the north, are to be found a greater number of Homœopathic physicians than in any other similar sized territory in the world. *All* these physicians should join the American Institute; they should not procastinate, but should send in their names *at once*. Homœopathy needs a strong national body to meet its implacable foe, the American Medical Association. Perhaps some will say that "implacable foe" is too strong an expression, but the facts of recent history show that it is none too strong and that if the A. M. A. had its way, organized Homœopathy would soon be a thing of history only. Don't neglect to join the National body of Homœopathy for when there is a fight on there is great virtue in heavy battalions, and there *is* a big fight on, from the Atlantic to the Pacific, from the Lakes to the Gulf—a fight that will probably be continued for years and in which the numerically weaker party must depend, in great measure, on organization for victory. JOIN THE RANKS.

IN a private letter from Dr. Julio F. Convers, of the United States of Columbia, to whom the profession is indebted for that valuable remedy *Jacaranda Gualandai*, he says, in speaking of the remedy, "I am persuaded by experience that it is one of the best remedies for leucorrhœa." An account of this remedy and a proving of it may be found in the RECORDER, January number, 1889, and July, 1890. In general *Jacaranda* is useful in blennorrhagia, chancroids, gonorrhœa, ophthalmia, etc. It may be had in tablets of the mother tincture.

THE
HOMŒOPATHIC RECORDER.

VOL. VI. PHILADELPHIA AND LANCASTER, JULY, 1891. NO. 4.

SOLIDAGO VIRGA-AUREA.

CASE 1. Mr. ——, widower, age 48, first consulted me on July 10, 1890. Gave a history of having had convulsions every two or three months for the last three years. I questioned him as to their character and made up my mind that they were ureamic. Requested him to call again and bring with him a sample of his urine. The examination of the urine found uric acid crystals in excess. Gave a grave prognosis and put on *Hydrochloric acid* 30x. Later he had *Apis*, and still later *Puls.*, for symptoms covered by these remedies. None of these afforded him any lasting good.

On October 12, was called to attend him in one of his spells. Inhalation of *Amyl nitrate* and *Glon.* 6x, internally, brought him out without any trouble.

He had another slight attack on November 14. I did not see him at the time, but he tells me it was not as severe as the one before it.

He called at my office November 21, complaining of the condition of his water. Had to pass it every hour or two during day and night. After some questioning I gave him *Puls.* 3x, and told him to report when the medicine was gone.

The next day or two I saw an article on *Solidago* in THE RECORDER and sent for an ounce of the θ, thinking it might be of use in his case.

He called again November 29 with his condition not improved. I found some tenderness in the small of the back. I then gave him *Solidago* 1 x, on disks, with directions to take two twice a day. He came back on December 5 to get his bottle filled. Said it was the only thing he had ever taken that made him feel like a man. Did not have to get up at night to pass water and could retain it with ease during the day. From that time to the present he has had no signs of a convulsion and his water has been natural.

CASE 2. Mrs. ———, age 37, married, has had seven children. Came to me December 10, 1890, with the following history: Had not had her menses for four months. Thought she was in a family way. Abdomen bloated up every P. M.; sick at her stomach all of the time; frontal headach, P. M.; felt better when first getting up in the morning, at which time her abdomen was almost normal in size.

Her water she complained of more than anything else. Had to pass it every half hour during day and several times during night.

Backache all of the time, which was not decreased by passing water. Urine had a white slimy deposit on standing a short time.

Requested an examination, but could not discover that she was in a family way. Found her back very sensitive in region of kidneys, trace of albumin in urine.

I gave her a vial of *Solidago* 1x., told her to take two disks every four hours and report in three or four days. She came back December 13, "the medicine went right to the spot." From the second dose her water became natural and she did not bloat so much in P. M. Her stomach did not bother her any more. I gave her a bottle of *Puls.* 3x to take with the *Solidago*, and she reported December 17 that her menses had come on.

I have used it in several other cases where it seemed indicated by the tenderness in kidney region and the inability to control the water from whatever cause, always with perfect satisfaction to patients and myself.

A. E. WHITE, M. D.

Black River Falls, Wis.

A PRACTICAL MATERIA MEDICA.

By Arkell Roger McMichael, M. D., New York City.

Read before the Homœopathic Medical Society of the County of New York, April 9, 1891.

Simila, similibus, curantur as a law may be perfect, but in its application as a system of medicine it has many faults, although the cures effected by this method, even with its imperfections, far outnumber any yet known to the scientific world for the healing of disease.

It is a well-known fact that our Materia Medica contains much that is valueless—material that has accumulated from sources

which, in the light of our present knowledge, are considered worthless. Many suggestions have been offered for the clearing out of this rubbish with which we are burdened, but the only remedy will be found in a reproving of our drugs on a scientific basis—a work which should be under the guidance of physicians whose only incentive for the work is honesty and love for the cause of pure Homœopathy. Without this we cannot expect to attain to a much higher level. We can sift out, fill in and patch up, but if the foundation is uncertain the results must also be.

The question arises, what can we do to make our present work practical? The solution of this problem is my only excuse for this paper to-night.

The value of a symptom which has always followed every proving of a drug, and which has many times been verified by cures, is well known to us all. It is the one we generally depend on when looking for a remedy to cover the totality of symptoms; and when we conscientiously prescribe and failure is the result, some of us are led to distrust the laws of similia.

Why we fail many times to cure our patients can be explained to a great degree in two ways: first, the symptoms we call grand characteristics, and on which so much importance is placed, have not been verified sufficiently to give them their proper standard of value. It is not an uncommon experience for some physician to recognize virtues in certain drugs that others do not find; consequently the value of a certain symptom designated grand characteristic is only relative to the number of cures by which it has been individually rectified.

Hahnemann's standard of valuation of any symptom was individual experience, and few, if any, authors since his time have placed in the category of grand characteristics any symptoms which have a greater value than is conferred by individual experience. Owing to the small number of Homœopathic physicians in those days, possibly no better method could have been followed; but to-day, with our army of followers, our combined experience can be utilized to much better advantage.

The remedy I would suggest here is one that can be easily applied and the value of which is readily recognized.

Put the standard of valuations on a mathematical basis. Do not place on the list of grand characteristics any symptoms which has not been verified by at least four different physicians, and not less than two verifications from any one of them.

A portion of the work of the Committee on Materia Medica of this society should be to select a drug—preferably one among the comparatively new ones—and collect reports of cures by it,

or verifications of its symptoms, these verifications arranged according to the above standard and reported to the society once a year. By this systematic work—the only basis on which satisfactory results can be obtained—much benefit would be realized.

Grand characteristics having this value, we may prescribe our remedies with more confidence and with better prospects of success.

The second cause of failure to cure our patients is the utter impossibility of making our prescriptions cover the totality of symptoms. When we consider our list of drugs, and, still more, their list of symptoms and realize the limits of our brains to grasp them, our only surprise is that the results are so encouraging. This inability to utilize the material in our Materia Medica during the rush of a busy life explains why so many well-known followers of Hahnemann's law resort to palliatives. They do not doubt its principle, but reject its mode of application.

The construction of our Materia Medica has not materially changed since Hahnemann's time. We still adhere to the crude form in which he left it; its anatomical arrangement is well adapted as a general work of reference, but as a practical work, one that can be consulted with advantage in a few moments, falls far short of our requirements.

As an illustration of what we require for daily reference, I have arranged the accompanying charts.* In considering the disease of a patient, that portion of the body which is immediately affected always encircles within its influence other portions which naturally lie in its track, or are so connected that their consideration becomes a necessity; and often indirectly the whole body may be so affected as to become an object of interest in order to complete our prescription. In the chart before you you will at once recognize the close relation which these different divisions bear to each other. Whenever the stomach is the centre of attraction we naturally expect some disturbance in the mouth or tongue, or look for some evidence of gastric derangement in these organs. In connection with these pathological conditions a train of symptoms show themselves, which owing to their importance, demand a special place in this table. Consequently, appetite, thirst, taste, nausea, vomiting, eructations and flatulence each presents itself for recognition.

---

*This paper is reprinted from the *North American Journal of Homœopathy*. The charts here referred to, and a full description of this important work, will be mailed free on application to the publishers, Messrs. Boericke & Tafel, 1011 Arch street, Philadelphia. The charts or specimen pages, are not ready yet, but all applications will be filed, and specimens forwarded at as early a date as possible.

The comparison of two or more drugs often becomes a necessity, especially when symptoms peculiar to one closely resemble those of another; and while a comparison of the symptoms which relate to any one portion of the body is generally sufficient, there are times when a complete picture of each drug is absolutely necessary to our decision, owing to their range of action and symptomatology being so closely allied. This comparison of the whole drug may be found in the concomitants, which include the more important grand characteristics of each.

In order to make this table complete, a column for clinical material has been allowed, although its presence is not indispensable to our prescription; it often confirms our choice, besides containing many symptoms not found in the original text, but none the less valuable.

No one can dispute the value of a repertory; it bears the same relation to a Materia Medica that an index does to a volume; and yet how few can be studied with any degree of satisfaction. The second chart before you represents a repertory, in part, to the foregoing table. Its most important features are: First, its alphabetical arrangement; second, the different heads under which any symptoms may be found; third, each symptom given in full, as revealed by the provers; fourth, the different type showing the value of each symptom, without referring to the table; fifth, its clinical symptoms and therapeutic limits. Repertories arranged anatomically have always been unsatisfactory, for the reason that many symptoms in their completeness refer to two or more portions of the body; consequently the uncertainty of knowing exactly where to look for them; and again, other symptoms may not refer to any special portion of the body, but simply express a sensation. These under alphabetical arrangement may be found, one as readily as the other. When a symptom is given us by a patient and we wish to refer to it, we often find it difficult to know exactly what to look for in order to find it. As an illustration, take the symptom, burning in the pit of the stomach. According to our repertories, arranged anatomically, we might find the symptom under either Gastric Region or Sensatious. In repertory arranged alphabetically, you would find it under three different heads, viz., *stomach*, *burning* and *pit*, the symptom in full following, so that if two of us were looking for that symptom, and one of us should think of it as under *burning*, and the other as under *pit*, we would both find it with equal readiness.

Repetition cannot be considered a fault unless want of space forbids it. This not only applies to the foregoing, where each

symptom may be found under four or five different heads on an average, but also to a common fault many authors have of abbreviating words and also symptoms, allowing the first letter to stand for the whole word, and putting in the most important part of the symptom while leaving the apparently unimportant part to the imagination of the reader. If a symptom is worth recording, it is certainly worth recording in full, as experienced by the prover. No doubt many times a prescription will be made simply on finding the symptom looked for in the repertory without further investigation, especially so if the symptom corresponds closely to that of the patient's, and still more likely if the symptom be a grand characteristic; and oftentimes we will find symptoms which are not only closely allied, but are identical, and if one should be in italics representing grand characteristic, and we are satisfied to prescribe on the symptom alone, we will not hesitate long in making our choice, which at once shows the importance of a symptom in the repertory being printed so as to indicate its value. Not the least important feature of this repertory is its clinical symptoms and its "therapeutic hints." Every symptom and disease referred to in the clinical column will be found in the repertory in the same manner as symptoms taken from the pathogenesis. If, as oftentimes happens, a patient is unable to describe or give us sufficient definite symptoms to prescribe on, we are compelled to prescribe pathologically; the repertory here will be found quite as valuable as when prescribing symptomatically.

The material in a work of this description in order to make it practical, must be that only which has proven valuable; consequently, symptoms which have the value of characteristics, and grand characteristics only, can be used. The surplus material may be none the less worthy, but until it has been brought up to a working standard, or verifications of its symptoms made by cures, its presence would not only encumber but confuse.

THE SPORT OF THE CAT IS FATAL TO MICE.

Dr. C. Kunkel.

Translated for THE HOMŒOPATHIC RECORDER.

According to the report of a Moscow paper (*Moskowskija Wedomosti*) September 1, 1888, a rich sheep-raiser living in the southern part of Russia had 8,000 sheep inoculated after the method of Pasteur, as a protection against anthrax; already on

the third day the epidemic was at its height and on the fourth day the following picture presented itself to the writer: Here and there, upon a large field, were huddled together small groups of sick sheep, altogether about 200; they could scarcely stand upon their legs; the rest lay upon the ground either dead or dying, so that the field was covered with those which had succumbed; an intolerable stench filled the air for a distance of several kilometers, as the intense heat of the sun favored rapid decomposition.

The owner, who had lost about 80,000 marks by these prophylactic procedures, instituted a suit for damages and the case came before the magistracy of Odessa, under whose protection this "beneficial" bacteriological station was placed; the results of the suit have not yet been made public.

Dr. Lutand gives many similar instances in his work entitled, "Pasteur et la rage," and says that the damage done to France by the inoculation for the prevention of murrain extends into the millions (p. 418).

The same Moscow paper spoken of above, on the 30th of November, referred to the following case occurring in Warsaw:

According to the reports of the Polish papers, a certain Stanislaus Litzewitsch, residing at Ljubartow, died of hydrophobia; the man suffered the most terrible agony while his mind remained perfectly clear; thirty years ago, when he was a boy of ten, he was bitten by a rabid dog.

Out of fourteen cases bitten by rabid animals in Kasan, some of which were inoculated at Moscow and some at Samara, two died of hydrophobia, therefore 14, 28 per cent. (Wratsch 1891, No. 6, p. 190.)

In the *British Medical Journal*, February 9, 1891, Dr. Spencer reports the following case of hydrophobia, which appeared two years and four months after the bite of a rabid dog. A child, æt. 5½ years, was bitten in the knee, the wound was immediately sucked out by the bystanders and then cauterized (with what and for what purpose was not stated), then an injection of chloride of iron was made near the seat of injury; the child, however, died, as stated, while two persons who were also bitten by the dog did not get hydrophobia.

Granted that similar known cases are exceptions, we must still admit that there are some which have not been made known, therefore their number cannot be estimated by single instances. If this is so—and no one can disprove it—the following question necessarily arises: Of what value are the statistics of bacteriological stations, of institutions for inoculation, of Pasteur's im-

mense Parisian institute; for in their reports all, or nearly all, who have been inoculated for prevention of hydrophobia have been discharged "cured;" moreover, if one wished to make the attempt, what means could be employed to prove conclusively, in an exact rational and scientific manner, that the patient would have gotten hydrophobia if he had not been inoculated, or that the attack of hydrophobia occurring after inoculation was not due to the treatment?

The *Daily News*, November 3, 1890, publishes a letter of Francis Power Cobbe, which was evidently written with the object of discouraging the introduction of institutions for inoculation in England; the following is quoted therefrom:

"According to the reports of Dr. Dujardin Beaumetz thirty-eight deaths occurred within four years in the Department of the Seine in consequence of Lyssa humana. Within the same number of years there occurred thirty-seven deaths in the Pasteur institute. It appears, therefore, that at the place where immediate aid is given the sufferer, and that place also which has been insured a solid income of 200,000 francs through the reputation of Pasteur, the reduction of the death-rate is limited to a solitary case, and it cannot be proven whether this was due to the inoculation or to other causes. The well-known editor of the *Provincial Medical Journal* says, and not without reason: 'I am convinced that the manifestations of Lyssa have been increased instead of diminishd by Pasteur. Wherever institutes have appeared which are conducted after his method, there has been an increase in the number of persons reported bitten by rabid animals, and there also seems to have been an increase in the number of rabid animals. The fright and the sufferings arising therefrom after the bite of an animal have been greatly increased, as all biting animals are considered rabid.'

"According to the report which is enclosed for your inspection, 207 persons have died of hydrophobia, after being inoculated in accordance with Pasteur's method, it is, therefore, evident, that death was not prevented, and even may have been due to the inoculation."

This fully accords with what Lutand says: "Mr. Pasteur ne guérit pas la rage, il l'a donné."

Arnica. *Arnica* is more apt than *Aconite* to spoil a case. *Arnica* makes a much more profound impression upon the system than *Aconite*. Its real culminating action is similar to typhus fever. Brilliant results have frequently been obtained with it in the worst forms of Typhus. No *Arnica* should be used except such as is made from the root.—HERING.

DROSERA ROTUNDIFOLIA AS A PROPHYLACTIC IN PHTHISIS PULMONALIS.

Dr. Rene Serrand, Paris.

Translated for THE HOMŒOPATHIC RECORDER.

1. Phthisis pulmonalis in all its various forms in amenable to treatment.

2. The sooner treatment is instituted the easier will be the management of the case, because the patient's general health is not impaired in the beginning, and the morbid, pathological changes are slighter and more circumscribed.

3. Treatment should not only be instituted early, but should also be prophylactic in nature so that the development of the disease may be prevented.

4. All those having a tendency to phthisis pulmonalis carry about with them plain indications of this morbid disposition.

5. The rational Homœopathic treatment of phthisis pulmonalis consists in the use of remedies which are selected symptomatically, or remedies which act upon the diseased tendency and therefore upon the original disease.

6. Among the remedies which aid in correcting a tendency to disease is *Sulphur*, there is, however, another remedy, belonging to the vegetable kingdom, which is capable of curing a morbid disposition to phthisis, and this is *Drosera rotundifolia*.

Dr. Currie made a proving of *Drosera Rotundifolia*, and his results are very interesting. He placed before the Academy of Sciences the results of his experiments which were made upon three cats to which *Drosera* had been given daily. The animals died, and upon dissection the pleura of all three were found densely covered with tubercles. If we consider this observation in connection with the well-known fact, that sheep which eat the leaves of Drosera become affected with a noctunal cough and finally die, it becomes evident in which class of cases *Drosera* is applicable as a remedy. Besides, *Drosera* is already known to Homœopathic physicians as a remedy for spasmodic cough. It is the most important remedy for phthisis pulmonalis, and there are constant indications for its use in all stages of this disease.

According to the assertions of Dr. Currie, a cure can nearly always be effected by *Drosera* when given in the initial stage of phthisis. *Drosera* can not only stay the development of tubercles but also prevent their production when administered early.

Drosera is, therefore, of equal importance, both as a prophylactic and as a curative agent. I have therefore been accustomed to give *Drosera* to all children who are born of phthisical

parents, and also to those who show no power of resistance against diseases of the air passages.

There are, however, certain indubitable indications which clearly show whether phthisis threatens to develop, and, as soon as they make their appearance, it is the duty of the physician to interfere.

I lay particular stress upon the fact, that there are such unmistakable premonitory indications. This is very important, for if it is absolutely necessary to combat every indication of manifest phthisis, it is still more important to tell months and years beforehand whether or no a patient is threatened with this disease, in order that all precautionary measures can be adopted. The treatment, therefore, begins long before any changes in the lungs can be detected.

A child, for instance, causes much anxiety. It is pale, weak, and eats but little. It has no hereditary tendency to phthisis. Examination of the lungs discover no morbid changes. Should this satisfy us? Should we conclude our examination and declare ourselves satisfied with results which only for the moment contra-indicate any complication of the lungs? This is generally done; but should we not endeavor to look into the future?

Only at a very much later period there appears a dry cough, the child becomes emaciated, and gradually all the symptoms of pulmonary phthisis are developed. Then one is anxious to combat the disease, but then tuberculosis is already developed.

What can then be told the parents who were so reassured after the first examination? It is the usual story; the child has had a cold, a long-lasting coryza, a neglected catarrh of the lungs, it is suffering from a congestion of the apex of the lung, etc., etc. The truth is, we might have foreseen all this if an examination of the larynx had been made as well as of the chest. There we would have found indications which, even at that early period, would have called attention to the threatening danger.

For years I have been in the habit of examining the larynx of all patients. I have been taught by subsequent clinical observation what far-reaching conclusions can be drawn from the results of such examinations. Positive, unmistakable indications appear in the larynx of patients inclined to phthisis, and these indications can be observed long before any definite changes in the lung structure can be recognized.

There are three such pathognomonic indications:

1. Anæmia of the larynx, the whole larnyx being pale and lacking its normal color.

2. The vocal cords are not sufficiently approximated, there

being a slight functional impairment of the crico-arytænoid muscles.

3. The mucous membrane covering and lying between the arytænoid cartilages is reddened and generally swollen.

These three indications can be found singly or collectively. When a single one is present phthisis is to be suspected; if all three are present, a positive prognostication of threatening tuberculosis can be made.

Anæmia of the mucous membrane of the larynx, imperfect approximation of the vocal cords, and congestive swelling of the mucous membrane in the region of the arytænoid cartilages are indications which have no connection with a possibly already existing laryngeal phthisis, but they are precursory symptoms indicative of some future manifestation of phthisis. The physician who possesses sufficient skill to discover these changes in the larynx is spared many failures, for being informed of the threatening danger, prophylactic treatment can at once be instituted and the development of phthisis prevented.

If *Drosera rotundifolia* now be given for a length of time, remarkable results will be obtained, and the value of this remedy as a prophylactic in phthisis will be fully acknowledged.

After phthisis has developed *Drosera* is still to be employed, but we also require the use of other drugs, for *Drosera* alone cannot cure phthisis. The latter corrects the morbid tendency to the disease and is to be aided by *Aconite* for an increased action of the heart.

Bryonia for intercuring catarrh of the air passages and lungs.
Silphium cyrenaicum to decrease expectoration.
Mercurius dulcis for colliquative diarrhœa.
Chininum sulf. for nocturnal rise of temperature.
Agaricus for night sweats.

I accordingly wish to call attention to the fact that there are certain indications which positively point to a disposition to phthisis, and that through the recognition of these indications preventive treatment may be instituted, and finally that *Drosera* in all such cases will not disappoint us in its prophylactic action.

LYCOPODIUM IN CYSTITIS.

Dr. H. Goullon.

Translated for THE HOMŒOPATHIC RECORDER.

A man æt. 55, subject to attacks of enteralgia, was seized two days after such an attack with a severe acute cystitis accom-

panied by fever, and palpitation of the heart at night. Thirty or forty times within a very short space of time the patient had to reach for the vessel, which he could scarcely get soon enough to prevent a premature escape of the urine, so severe and sudden was the urging. He suffered intense burning pain during and sometimes after the passage of urine, "as if molten lead were flowing through the urethra." During the height of the pain he grasped the organ in order to obtain relief. The urine which was discharged in very scanty quantities looked turbid, almost loamy, and had a dirty brownish-red color, while there was present a peculiar odor of malt.

Six drops of *Lycopodium* 12c. in half a wine-glass of water of which a teaspoonful was administered every three hours cured in twenty-four hours.

A PROVING OF FICUS INDICA.

By Dr. O. N. Banerjee, Calcutta.

In June, 1888, while visiting a patient in the country I saw in the garden a large tree of the variety known as Ficus Indica. As the tree is considered sacred I regarded it and its branches, which were ladened with ripe, yellow fruit, with the the greatest interest, and plucking one of the fruits, ate it upon an empty stomach. To my great astonishment there occurred one hour thereafter an unusual frequent desire to urinate, I did not relish my breakfast, there was loss of appetite and sour belching; in the afternoon the urine became phosphatic and I suffered from headache; in the evening I felt an itching of the thighs, heaviness of the head, dullness of the mind, and a burning heat over the body; there was but a scanty discharge of urine during the day.

After gathering a large quantity of fruit I returned to Calcutta and made an alcoholic tincture thereof; this was distributed among nine provers; two drops of the mother tincture were taken every morning before breakfast for eight days.

The results of these nine provings are put into a practical form in the following resume. The figures appended indicate the number of times the symptom was observed:

Mind. Anxiety, 2.

Head. Headache, 9; on the left side, 5. Heaviness of the head, 5. Vertigo, 5.

Eyes. Burning sensation, 5; in the right eye, 3. Pain, 3.

Ears. Heat in ears, 3.
Nose. Sensation of warmth in alae nasi, 3.
Mouth. Heat in mouth, 3.
Throat. Pain in throat, 2.
Appetite. Good, 7. Impaired, 2.
Thirst. Thirst, 2.
Stomach. Soreness of stomach, 7. Offensive belching, 2. Nausea, 4.
Abdomen. Soreness of abdomen, 6.
Rectum aud Anus. Pain in anus, 3.
Stool. Without any difficulty, 7. Diarrhœa, 7. Hard, 7.
Urinary Organs. Micturition without any difficulty, 6. Urine amber-colored, 7; phosphatic, 8. Frequent urging, 2. Scanty, 4 Soreness and burning pain in kidneys, 4. Burning sensation on urination, 5.
Sexual Organs. Seminal emissions, 5.
Chest. Soreness of sternum 6. Burning sensation, 3.
Pulse and Respiration. Pulse, 72–84. Respiration, 14–22.
Neck and Back. Pain in the left side of nape of neck and jugular vein, 3. Soreness of scapula, 3.
Upper Limbs. Burning in the palms of hands, 2. Itching of hands, 2.
Lower Limbs. Pain in the right femur, 2. Soreness of the thigh, 4. Itching, 2.
General Symptoms. Desire for fruit, 4. Desire for sweets, 4.
Skin. Itching, 3. Eruption, 2.
Sleep. Awoke too early, 4. Dreams, 3.
Chill and Fever. Fever, 2. Chill 3.

As a remedy it has been used successfully in every case presenting the following conditions: Frequent, at times unsatisfactory discharge of amber-colored or posphatic urine with discharge of seminal fluid, headache, heaviness of the head, itching of the limbs, thirst, dyspepsia, ill humor, irregular stool, disturbed sleep.

CORRESPONDENCE.

PORTLAND, Oregon, May 31, 1891.

The fifteenth annual meeting of the State Homœopathic Society of Oregon was held in Portland, May 12 and 13. There was a very full attendance and the session was unusually inter-

esting. The following officers were elected for the ensuing year: B. E. Miller, M.D., President; Osman Royal, M.D., First Vice President; H. C. Pfferds, M.D., Second Vice President; Orpha D. Baldwin, M.D., Recording Secretary; H. F. Stevens, M.D., Corresponding Secretary; C. L. Nicholls, M.D., Treasurer. A committee was appointed by the president for the purpose of endeavoring to influence legislation for a separate State licensing board or proper representation on the one already existing.

H. F. STEVENS, *Sec'y.*

MESSRS. BOERICKE & TAFEL.

Gentlemen: In the May number of THE RECORDER I notice an article from the pen of Dr. Caulkins, copied from the *State Journal of Homœopathy*, calling attention to the prompt action of sticta pulmonaria in tedious coughs following in the wake of measles, after other symptoms are well cleared up. I would like to call the attention of the profession also to *Eupatorium perf.* in this connection, which, after many years' experience, I have come to consider almost a specific. These two drugs can now be placed side by side, and by their aid according to their individual Homœopathicity we may be helped out in all such cases.

Very truly,

C. CARLETON SMITH.

Philadelphia, June 11, 1891.

SELECTIONS AND TRANSLATIONS.

SOME EXPERIENCE WITH PASSIFLORA INCARNATI.

The following experience with this interesting drug is taken from a paper by Dr. Adolphus, of Georgia, which appeared in the *American Medical Journal:*

I wish more particularly to call attention to its therapeutic use in several diseases more or less dependent on abnormal nervous excitement; also on some uterine diseases, attended with painful mensturation.

The first case worthy of report was one of pain in the brain.

A lady who had for several months suffered untold agonies as she described her sufferings; her pain was described as if a weight of many pounds was laying on her brain; the sense of pressure and tearing inside the skull was fearful; her head felt as if enveloped in ice; the pains ran down the back of her neck, and finally reached the lower end of sacrum, so that a slight touch of the coccyx caused exquisite agony. This was a case in which coccygodinia was associated with the cerebal and spinal disease. I failed to relieve the pain for more than a few hours at a time with all other remedies I had tried; at this juncture, when despair was taking the place of hope, I thought of *Passiflora*, which I then administered in teaspoonful doses every two hours; the result was something to be remembered, for she enjoyed excellent and refreshing night's rest the following night, waking up in the morning much refreshed, nearly free from pain, with a good relish for breakfast. I continued the medicament every four hours for several days, for no further uses for medicine seemed indicated, as there was a rapid and complete recovery.

No longer than last October I cured a case of painful menstruation with the medicament, after failing with *viburnum prun.*, *gelseminum semp.*, etc. This was an inveterate case that had been going the rounds for two years.

A few months ago I treated a case of neuralgia of the fifth pair, the ophthalmic branch being involved, as you know the lenticular ganglion is anatomically and physiologically, together with a branch of the third nerve, all associated with the sensory and vaso-motor functions in the eye. I found *passiflora incarnata* a prompt medicament in stopping the pain and clearing up vaso-motor paresis and extreme dilation of the pupil of the affected eye.

The dose was a teaspoonful of the tincture every two hours.

I find the medicament a valuable agent in all nervous affections attended with those peculiar excitements that lead one to suspect congestion of the cord and ganglionic centers. It undoubtedly acts as a sedative to the ganglionic cells in the gray matter of the cord; also on the ganglia in the thorax, pelvis and abdomen, as well as those in the brain. Its influence in quieting and sedating the vegetative system of nerves is very striking, and also the centres in the medulla oblongata.

I attended a lady during her pregnancy on account of pains in her uterus, abdomen, pelvis, and one peculiar symptom was constant quick respiration night or day, never less than thirty-five per minute. I determined to try *passiflora*, which I administered in half teaspoonful doses every three hours. In twenty-four

hours the respirations were reduced to twenty-six, and with the lowering came relief from pain. In forty-eight hours more, the respiratory movements were reduced to twenty-one during wake, and never fell below eighteen during sleep. This case taught me to look on the action of the medicament as a sedative to the moter centres in the medulla, and most probably of the ganglion cells in anterior cornea of the cord. I also treated a boy three years old last fall who had a diarrhœa as a sequel to an acute attack of entero-colitis. I found the respirations fifty per minute; the bowel discharges were thin, watery, offensive, six to ten per diem. Other medicaments failed on him; *passiflora*, in one-fourth teaspoonful every two hours, worked a complete cure in three or four days; the first symptom to yield was the quick respiratory movement.

In the convulsions of children we have in the *passiflora* a safe and almost specific medicament. It may be given in half teaspoonful doses with confidence, repeated every hour until the convulsions cease.

I used the medicament in a case of constant uproar and movement of the small intestine and more or less tympanitis, in a lady in the middle of her change of life troubles, in doses of teaspoonful of the tincture repeated every two hours, with marked success.

A lady complained of pain in her rectum continuously; the coccyx was also quite tender to the touch. There were several erosions on the lips of the os uteri; leucorrhœa and severe pain in the small of the back when a certain spot (over last dorsal and first and second lumbar vertebræ) was pressed on. I found she had been treated secundum artem for the uterine trouble, locally and constitutionally, to no certain satisfactory result. Her respirations were often twenty-eight to thirty per minute, much wakefulness, and at times feeling of constriction across her breast and a sense as if her heart would stop beating. Teaspoonful doses of the *Passiflora incar.*, was the specific in her case. She continued it every four hours two weeks, but from the outset of treatment she felt the right remedy was administered.

These rectum troubles in women are frequently met with in practice. I find the *Passiflora incar.* the best single remedy I have for them.

Recently a man consulted me for a constant pain in his heart; he described it as sharp, and like a pang—often causing a sense of immediate dissolution, and fear of death was on him all the time; pulse irregular in rhythm, now rapid, next slower, occasionally a beat missing; sounds were normal, but accentuated and sharp. *Passiflora incarnata* was a specific in this case; no

doubt the center and probably the local ganglia were irritated from some cause, and, whatever it was, the medicament removed both.

By the way, I must not forget to say, you will find it a valuable medicament in sleeplessness and tossing restlessness in your fever patients. I use the tincture in teaspoonful doses every four hours. It appears the remedy has a soothing effect on the whole nervous system, without any appreciable narcotic properties.

CASES OF SEVERE TYPHOID FEVER JUGULATED BY PYROGENIUM.

By J. Compton Burnett, M. D.

Some short time since a London merchant, about thirty years of age, came under my observation with typhoid fever. This was October 17, 1890. He had then a temperature of 104.5°, diarrhœa, considerable delirium—it was two persons' work to keep him in bed. *Aconite* eased the sensorium appreciably, but did not sensibly modify the temperature.

On the 17th of the month, also, the spots on the abdomen being considered peculiarly characteristic, and the outlook being ugly, distant friends were summoned in case of no improvement.

Prescription.—*Pyrogenium* 5, five drops in water every four hours.

20th.—Temperature last evening 103.2°; there is quite distinct improvement in the patient's state, there being no further delirium; diarrhœa no better.

℞ *Pyrogenium* 4, five drops in a tablespoonful of water every three hours.

Temperature at noon 102°, pulse 100; temperature at night 101°.

21st.—Noon temperature 100°, pulse 101; night temperature 101°.

To continue with *Pyrogenium* 4.

22d.—Noon temperature 102°, and at night also 102°.

To continue with *Pyrogenium* 4.

23d.—Noon temperature 100.5°, and at night 102°.

To continue with *Pyrogenium* 4.

24th.—Noon temperature 100°, pulse 98; night temperature 101°, pulse 100.

To continue with *Pyrogenium* 4.

25th.—Temperature both at noon and at night 101°; pulse in the evening 104.

26th.—The temperature at noon was 100°, but it was not noted at night.

Continue the medicine.

27th.—The temperature at noon was 102°, and at night also 102° (barely).

Continue with *Pyrogenium* 4.

28th.—The temperature at noon was 102°, at night 98°. From this point on there was *no more fever*, but the diarrhœa continued.

A week later there was still no fever, though the very offensive diarrhœa and weakness continued.

Carbo. An. 5 and *Arsenicum* 5 then did all that was needed, *i. e.*, cured the diarrhœa in four days. Here I am merely concerned with the jugulation of the "typhoid quality of pyrexia" by *Pyrogenium*.

The exact date of the commencement of the pyrexia could not be accurately fixed; but it was about the 11th or 12th. Let us assume it to have been the 11th, then the temperature on the sixth day was 104.5°, and *Pyrogenium* 5 was begun. The subnormal temperature was reached on the evening of the 28th, or the seventeenth day of the fever, and the eleventh day after beginning with the *Pyrogenium*.

The steady *though slow* grip of the fever by the *Pyrogenium* was manifest to patient and to the on-lookers, both skilled and unskilled, patient himself feeling and sleeping better in steady *crescendo*. The persistent diarrhœa amply accounted for the debility.

I have since made closer inquiries from the patient and his relations, and find he was in his usnal health on the Sunday, October 12th. On the evening of the 12th he had very pronounced rigors and went to bed. He then became on the Monday, October 13th, maniacal or typhomaniacal, and there was fever, and he remained in bed; Tuesday, 14th, fever rising; Wednesday, 15th, fever still rising and diarrhœa begins; Thursday, 16th, diarrhœa, hyperpyrexia, *Aconite* used domestically *à l'insus;* Friday, 17th, with a temperature of about 104°, the *Pyrogenium* 5 was begun in the evening. On the evening of the 28th the temperature came down to 98°, when the *Pyrogenium* 4 was discontinued, and no medicine of any kind given. But as the diarrhœa still continued a week after taking the last dose of *Pyrogenium*, *Carbo. An.* 5 and *Arsenicum* 5 were given, and the bowels became normal the fourth day therefrom.

November 19th.—Patient came to see me at my rooms; he was still weak, and showed a trembling, raw tongue. I ordered *Kali-iodic* 30, and sent him into the country; whence I hear that he is getting better and has an enormous appetite.

Now, assuming that typhoid in the first week has a rising temperature, in this one the rise was checked a little by Sunday night, the 19th; there was distinct improvement, although the remedy had only been given two days.

Assuming that the pyrexia of typhoid remains during the second week at the same level as at the end of the first week, and also continuous, what do we find at the end of our second week of the fever? That the fever is less and remitting already, and not continuous at the same level.

Further, assuming that the pyrexia of typhoid during the third week of its course begins gradually to remit, though still reaching its old maximum at the exacerbations, we have in this case a sudden and complete cessation of the pyrexia on the second day of the third week, while there is no fourth week of pyrexia at all.

I submit, therefore, that in this case the typhoid quality of pyrexia, essentially the typhoid fever (*here* the whole case), was jugulated by medical art by means of *Pyrogenium*.

And, inasmuch as the fever was clearly of a severe type, and the subject an unfavorable one—a highly-strung, sensitive, brain-feverish kind of man—it is highly probable that, but for the *Pyrogenium*, he would have succumbed to the fever.

I therefore think that my advocacy of *Pyrogeninm* for the typhoid quality of pyrexia (Drysdale) respectively as a remedy for typhoid fever, being founded on scientific principle, is now further supported by another fact of clinical experience. For further experience with this potent remedy, see the pamphlets by Dr. Drysdale and by myself, respectively.

I told patient when he went into the country to report to me after awhile; the report came, and thus runs:

"Nov. 28th, '90.

"*Dear Sir*—In accordance with your request I am writing to report progress. I am happy to say that I appear to be going on satisfactorily in every respect, notwithstanding the weather and my inability to go out. All traces of diarrhœa have disappeared, as well as the odor at stool that was so disagreeable; in fact my bowels have been beautifully regular. The only thing that troubles me is a little flatulence, which I suppose will pass away with returning strength. It is now no effort to me to walk, in fact, rather a relief than otherwise. The doctor that operated upon and is attending upon ——— is literally astounded at my

rapid recovery. If there is any further information you would like to have and which I may have forgotten in this letter, I shall be pleased to answer any questions you may like to put to me; and am, yours gratefully."

From his brother I hear that patient shortly returned to his professional duties, and continues thereat in excellent condition. In judging therapeutic results we must compare *not merely mortality*, but also—(1) Duration of the disease; (2) Duration of convalescence; (3) Whether the restoration is to integrality or only partial; points very commonly overlooked. Patient was in bed altogether three weeks and two days.—(*Hom. World.*)

London, February 26, 1891.

MICHIGAN.

The *Transactions* of the Homœopathic Medical Society of the State of Michigan, for the 20th and 21st sessions, came duly to hand.

President L. M. Jones, M. D., in his address among other good things said:

"We have arrived at the conclusion that in these days we have well authenticated testimony to prove that our school is in the happy possession of not only specific single remedies for all the more grave diseases, but that we have also preventive remedies in nearly, or quite, all the graver diseases to which the human family is heir, such as cholera, yellow fever, typhoid fever, pneumonia, diphtheria, etc., and especially how very often do we prevent hysteria, epilepsy or magnus morbus, and insanity in women, with the indicated remedy, and proper management of uterine and ovarian diseases, beside many of the diseases peculiar to children, such as scarlatina, whooping-cough, etc." This isn't news, but in these days of proprietory coal tar medicines it is well at times to restate the old truths.

President D. M. Nottingham, M. D., in his address alluding to dissentions which ever and anon crop out says: "Men may differ and yet be courteous and have due respect for an honest difference. It is by active competition and honest criticism that every case is more thoroughly studied, and the faithful student more brightly polished." This also is not new, yet it is well to restate it at times.

Pathology.

Dr. Frank Krafts' paper, "Pathology as it relates to Thera-

peutics," is so much to the point—Homœopathic point—that we freely quote from it:

"'Pathology is what we know of disease.' As that sweet Melanchthon of Homœopathy, Carroll Dunham, somewhere has said, 'I think I may know exactly when my buggy broke down; I may be able to describe learnedly the fault in the grain of the wood, the flaw in the iron; may be competent to trace the wood through its various gradations back into its primal elements; may be capable of writing a treatise on metallurgy, showing the faultiness in the metal composing the broken part of my buggy, I may even be posted in geology, meteorology, and the other essential things which united in breaking my buggy; but and unless I am a practical wheelwright all this erudition will not restore my buggy. On the other hand, if I am a good wheelwright, I will not need to concern myself with these excellent though practically useless accomplishments. I will take the buggy, overhaul it, find its breakage, repair and rebuild until it leaves my shop as good as before the breakdown. To make the application—I may know exactly where my patient was exposed to his ailment; I may know that he ate or drank that which precipitated the attack; I may know that his heart is twice its normal size, that there is a cancer in the pyloric orifice, or a dangerous inflammation of the Peyer's patches, but if I am not a skilled Materia Medica man, the pathological knowledge will serve me but little, if any.'"

"That I may not seem dogmatic, and in order to make plain the position I assume, I ask permission to append two cases from my practice."

"Mrs. Fred. D., living on a farm in Michigan, æt. about 48, was given up to die with cancer of the stomach. I was the fifth or sixth physician called in, and then only, I suspect, more in derision of my school, than with any expectation of help from 'little pills'—my predecessors having all been members of the old school—or possibly to put the signing of the death certificate on me. I asked the question, quite natural under the circumstances, what is the matter with her? Cancer of the stomach, came the answer. The doctors had all agreed upon that diagnosis, and had set her death for two weeks ahead—long enough to have relatives, who had been telegraphed for, come from Dakota. Pathologically she had cancer; an intimate acquaintance with that disease had left no doubt in the minds of the pathological prescribers on that score, and the treatment was fo cancer. Entering into the case between the eleventh and twelfth hour, I firmly resolved to ignore the cancer, and address myself

wholly to the eliciting of symptoms, if any could be found under the mass of drugs. I found the lady propped up in bed, a constant stream of saliva running from the corner of the mouth onto a board, and down the board into a chamber vessel. If she lay down, the saliva choked her. Restless, fidgety, nervous, uneasy, terribly prostrated, the stomach on fire like the slaking of lime, with the explosion of air bubbles, and eructations of burning hot gas, which had cankered the mouth. Water, a bare touch to the tongue, was sufficient. Yellowish-white, transparent complexion; œdematous appearance of the face and dependent parts of the body. So weak could hardly speak; 'tired unto death.' Bowels running off too freely. What was this but cancer? Had I been better versed in pathology than I am in Homœopathic therapeutics I would perhaps have given Dr. Mitchell's recommendation of Arsenicum 2x and 3x a trial, and lost my patient. Remembering the teachings of my old preceptor, Dr. Wilcox, of St. Louis, and of my alma mater, I went back into the history of the case to look for a cause for this alleged cancer in an otherwise healthy family. I found that some eight months preceding this time now spoken of, being in July, the 'menfolks' had gone to town, leaving her and a small girl alone on the farm. While engaged in putting up fruit she heard the dog bark, and going to the kitchen door saw some pigs had found their way into the garden. Throwing a sun bonnet on her head she rushed out, and after considerable exertion succeeded in driving the pigs out. She returned to the house all in a perspiration, panting and almost breathless, sat down in the kitchen door on a stone door sill, a strong current blowing through the kitchen from an opposite door, and fanning herself with her apron. She remembered that she suddenly shivered, got up, washed her hands and face, and resumed her preserving. But within three or four days she began to have nondescript chills, rheumatic twinges took her here and there, appetite began to fail, she grew nervous and peevish, couldn't get to sleep till after midnight, and then she was driving pigs or doing something else in her dreams that caused unusual exertion. Quinine eventually 'broke' the chills, but the lady felt that she never got completely over the 'breaking.' She continued to grow weaker until she was bedfast. Then the old school pathologists began to experiment on her with cancer medicines, until they and the relatives reached the conclusion that death was imminent. I gave Mrs. D. one dose of Nux Vomica on general principles, to antidote the cancer medicines of the pathologists; put her on *Sac-lac* for twenty-four hours, and at the end of that times she received *Rhus tox.* in

water, one powder, divided into bi-hourly doses until all was taken. I treated her ten days, and with but one exception, that of a solitary dose of sulphur, she received no other medicine. She is alive, fat and hearty to-day, and the funeral has been postponed. Did rhus tox. cure cancer of the stomach? I don't know, and what is more I don't care. But this I do know, that the instant I found the clear cut totality for rhus I told the lady, 'You have no cancer, and you will get well.' I found rhus symptoms so unmistakable, that it made no matter to me whether she had cancer, corns or consumption, I knew I could help her. Of what value would pathology have been to me in this case? Even supposing that a perfect knowledge of pathology had saved me from the error of diagnosing a cancer, what more could it have done beyond giving me a long-handled name for what I chose arbitrarily to call nervous dyspepsia? It could not in the remotest degree have suggested the remedy or remedies."

"The other case occurred in June, 1888. Mr. Jerry M., a middle-aged farmer, residing a few miles south of this village, had been bedridden for upwards of ten years. Had doctored, and doctored, and doctored, until discouragement set in, and he began investing in patent medicines. One doctor had told him he had a cystic tumor of the left liver; another, that his liver was grown fast to his midriff; another that he had holes in his liver like those made by buckshot; another, that he had what I interpret to have been cirrhosis of the liver; another, that the bottom of his right lung had hardened and had rubbed a hole in his liver; another, that there was a bag of water as big as a teacup on the under side of the liver; in short all the learned old-school physicians, except one, had saddled the disease on the liver; pathologically it was a liver trouble and he was given liver medicine; he got lots and lots of it. The more he got the less strong he became, until eventually he could not leave his bed. The excepted one said he had stomach fever and needed calomel. This went along from bad to worse, until one of his grown-up sons, meeting the last attending physician, got out of him the declaration that all the doctors in the United States couldn't get the father out of bed again. The son took it upon himself to discharge the physician, and came to see me for a little talk. The result was that I was persuaded to take up this forlorn-hope case, and visited the patient. The history I received has already been detailed. I resolutely determined to put the liver behind me, and addressed myself wholly to the presenting symptoms. I found him a little, dried-up old man, prematurely old, a squeaky voice, yellow of complexion as a ripe cow pumpkin, dyspeptic,

hungry for oysters, but they were no friends of his; terrible agony from wind in his bowels, eructations and flatulence, rattle in his abdomen like distant musketry, a most pronounced four o'clock aggravation, pain across the 'coupling' of the back, constipation, piles, bloody urine, with red sand sediment—in short, a lycopodium case. And that was what he got and nothing else. I made him two visits, and the man is alive and well. (I met him to-day, March 12, 1890, driving a fiery team of young horses, feeling himself as he hallooed to me, 'pert and sassy.'"

"Now for the application. Suppose I had been awed by the many diagnoses of my predecessors of the old school, who are nothing if not pathologists, had followed in their wake, and given 'liver' remedies, what would have been the result? Unquestionably death. As in the former case, I am moved to ask of what especial value would a close pathological knowledge have been to me in this case?"

"To recapitulate, therefore, I beg to say as in the beginning, if the chief end of a physician is to cure the sick, to do so, homœopathically, I can do it equally well with the pathological prescriber; and, further, that if I give my leisure time to the study of materia medica, I can make more and better cures than the pathological prescriber. Hence, I conclude that there is no vital relation between pathology and homœopathic therapeutics."

Orificial Surgery.

Dr. A. B. Grant, in his paper on "Orificial Philosophy," said: "It is an axiom of orificial philosophy that diseases of an organ always starts at its mouth, and consequently all orifices should be dilatable and free from all forms of irritation." Among the curable troubles—curable by orificial surgery—are "neuralgia, sick headache, dyspepsia, constipation, chronic diarrhœa, functional diseases of the heart, neurasthenia asthma, hay fever, epilepsy, cramps, numbness, and poor capillary circulation;" to this list is added, later on, "migrane, dysmenorrhœa, palpitation, sleeplessness, many cases of tuberculosis, insanity, locomotor-ataxia and paralysis." A long and goodly list.

Kali. Phos.

Dr. J. C. Nottingham in his paper had the following to say of the familiar yet, at the same time, unfamiliar *Kali. phos.*: "The subject this Bureau of Materia Medica has to bring before you is *Kalium phosphoricum*, a therapeutic agent doubtless all feel perfectly familiar with, and many will risk affronting us by leaving the room at the mention of so familiar a topic, yet I believe that the remedy *Morphia sulphate*, if brought into discus-

sion here, would not lose interest for hours; each one could relate long stories of experience with *Morphia*, stories of calamities and narrow escapes from calamities, and blessings received from sufferers for the relief from pain and the sweet sleep following. This last can be told of our topic, *Kali. phosphoricum* (yet they bear no therapeutic comparison), but the former, the calamities, will be omitted, and I ask you the relative importance of these two remedies."

"*Kali. Phos.* is well-known to all our physicians (thanks to Schüssler), and I presume each one may have his own individual ideas of the symptomatic indications for its exhibition, in the absence of provings; but this bureau, headed by the chairman appointed by your committee one year ago, and the committee who selected Doctor H. C. Allen for the work knew their business, attempted to obtain some provings to be presented to this society. I am extremely sorry for the society that I was substituted for Doctor Allen, and that this society should be robbed of so good an auditor. But take what we have to offer you, tear it into pieces and call it a failure if you want to, but of this be certain, viz., it was not our seeking.'"

"I have found my own indications for *Kali. phos.* in nervousness, restlessness, a fidgety feeling in the feet, a trembling sensation in the muscles, especially of the legs, the gastrocnemii muscles. An aching nervous feeling in the cerebellum and upper cervical region, and a tenderness over or just posterior to the mastoid processes, which, when aggravated, seems to cover the entire head or brain. I find these symptoms most frequent in dark blondes, with unsteady eyes which look rather through the eye-brows, or when observed fix the eyes upon something, or in vacancy. In short—in persons who are suffering from suppressed, or excessive sexual indulgences, in putrid discharges smelling like carrion, as the stool, perspiration, urine, etc., a cross, irritable disposition, or feeling repulsive to conversation."

There are many other interesting papers in the *Transactions*—thirty-one—but want of space draws the line.

A STUDY OF DELPHINIUM STAPHISAGRIA.*

By Edward Blake, M. D.

Not the most insignificant of those bays which must for ever deck the brow of the Immortal Master is that he laid bare a thousand unsuspected virtues lurking in those old simples of which we talk so much, and, I fear, use too little.

---

*Read before the British Homœopathic Society, May 7th, 1891.

You all know that the transcendent genius of Hahnemann, like that of the great Darwin, who resembles him in so many ways—in modesty of manner, in simplicity of mind, in patience of investigation and in an extraordinary power of minute, nay even microscopic, observation—is shown not so much by the brilliant generalizations with which each startled the quidnuncs of his day, as by the amazing number of hard and stubborn facts, well observed and well authenticated, which these giants managed to heap together into time-defying scientific tumuli.

The splendid hypotheses of both have already been shaped and pared by the effects of new observations and of added knowledge. But the strict logic of their facts remains, and must remain, as an undying monument, more persistent than the pyramids of Egypt.

That the Seer of Cöthen's having contributed more actual specifies to medicine than any known physician, before or since his day, may possibly form the popular basis of esteem in a day when few persons have any leisure to think, is more than probable. To us this is not so; to us has been accorded the rare privilege of knowing this unrivalled mind in its deepest recesses.

There was a time when the intellect of man was so large that small matters could not be contemplated without a fine sense of scorn; now it is but a trite truism to say that the infinitely great is necessarily based on the infinitely little. If men were weighed by the actual practical benefits which they have conferred on their kind, none would hold his own with this plain physician, who first taught us the way to cure cheaply and quickly, not indeed so much those rare and recondite diseases, which distress the rich, as those common, vulgar ailments which afflict ordinary work-day humanity. Nor did Hahnemann, who was ever actuated by the pure spirit of research, think it beneath him to test the powers of a common plant, the Larkspur, chiefly connected in the minds of men to this very day with a loathsome parasite. He stooped to this species of organic small-tooth-comb, and, rescuing it from its ignoble alliance, placed it in the honorable post of the forefront in that great army which he recruited to fight the old battle against disease and decay and suffering and death. The fact is, we are not half vain enough of Hahnemann, and of his work and his powers; familiarity has robbed them of some of their *prestige;* we are used to them, and we take them too much for granted. *Delphininm* is itself a drug of which all good Homœopaths ought to be very proud. As a curative agent Hahnemann literally created it.

It was the custom of Hahnemann to introduce a fresh drug to

the notice of his disciples, and of the profession at large, by a kind of little speech of introduction. Just as we present to each other two distinguished guests with a small verbal flourish of trumpets.

But in the exordium which precedes the *Delphinium* proving, we miss the imposing list of Old School authorities with which we are familiar in Dr. Dudgeon's well-known translation—a list amounting to no less than 93 names in the case of *Opium*.

Neither references nor quotations from traditional medicine are cited for *staphisagria;* and for the best of all reasons, there were none for Hahnemann to cite. So we do well to call it a Creation of the Master's Mind.

We may remember that *staphisagria* was proved by Hahnemann himself, and by some of his most careful and conscientious coadjutors—Cubitz, Franz, Gross, Gutmann, Hartmann, Haynel, Herrman, Hornburg, Kummer, Langhammer, Stapf and Teuthorn, who recorded between them no less than 721 symptoms, of which 200 were observed by Hahnemann himself.

We are constrained to say that of the 64 drugs (omitting the three magnetes) whose provings Hahnemann left as a priceless legacy to the world, not one has been more thoroughly worked out; and yet *staphisagria* has scarcely received fair treatment from us, it has been a little "left out in the cold."

Let us turn to the memorable words with which Hahnemann ushers into the world this new Therapeutic Child of his.

"What enormous power must not this drug possess! Now, as our new and only healing art shows by experience that every drug is medicinal in proportion to the energy of its action on the healthy, and that it only overcomes the natural disease by virtue of its pathogenetic power provided it is analogous to the latter, it follows that a medicine can subdue the most serious diseases, the more injuriously it acts on healthy human beings, and that we have only to ascertain exactly its peculiar injurious effects in order to know to what curative purposes it may be applied in the art of restoring human health. Its power, be it never so energetic, does not by any means call for its rejection; nay, it makes it all the more valuable; for, on the one hand, its power of altering the human health only reveals to us all the more distinctly and clearly the peculiar morbid states which it can produce on healthy human beings, so that we may all the more surely and indubitably discover the cases of disease in which it is to be employed in similarity (homœopathically) and therefore curatively; whilst, on the other hand, its energy, be that never so great, may be easily moderated by appropriate dilution and

reduction of dose, so that it shall become only useful and not hurtful, if it be found to correspond in the greatest similarity with the symptoms of the disease which we wish to cure. It is just to the most powerful medicines in the smallest doses that we look for the greatest curative virtue in the most serious diseases of peculiar character for which this and no other medicine is suitable."

"For these unexceptionable reasons," says Hahnemann, "I anticipated a great treasure of curative action in the most peculiar diseases from *staphisagria;* and these reasons led me to make careful trials of it on healthy subjects, the results of which are recorded in the following symptoms. Thus, curative virtues have been elicited from this medicinal substance which are of infinitely greater value than its power to kill lice (the only medicinal property the ordinary quackish medical art knew it to possess), curative virtues which the homœopathic practitioner may make use of with marvellous effect in rare morbid states, for which there is no other remedy but this.".

This is a remarkable utterance; it is interesting as being one of the clearest and simplest of the enunciations of the so-called law of similars.

A careful study of the genius of *staphisagria*, and of its alkaloid *delphinine*,* reveals the interesting fact that these drugs are especially called for in the diseases peculiar to the extremes of life. The fierce metabolism of infancy, and the perverted tissue-changes of a second childhood, call alike for such remedies as *staphisagria baryta* and their congeners. In their action in the domain of the special senses, on the region of the nape, on the alimentary tract, the glandular system, the urinary apparatus, and the lower extremities, they present many points of resemblance.

Dr. James Dore Blake, of Taunton, a most able practical physician, one of the pioneers of homœopathy, who sustained a bitter persecution for his creed in the earlier part of this century, well known as the first prover and introducer of *calendula*, relied on *staphisagria* as his stock remedy for senile sciatica. He was of course led to select this particular drug from observing that not only does *staphisagria* cover the constipation so often lying at the root of this form of neuralgia in the aged, but at the same time it aids so many of the side issues, *par exemple*, the vesicle troubles and the nuchal sorrows so frequently associated with it.

It was the outcome of my study of these sides of *Staphisagria*

---

*See Article Staphisagria, vol. iv. of *Cyc. Drug. Pathog.* p. 131.

that induced me to give it a trial in that common but distressing result of motherhood, a pouched and protruding bladder. We, British doctors, owe a great debt to the penetration of our trans-atlantic brethern for first forcing the gravity of neglected cystocele on our notice. To them, too, will go up the incense of gratitude from myriads of mothers as yet unborn, who will reap the benefits of American gynecic teaching. For though the wisest accoucheur may, in spite of a thorough maceration and wearying out by means of preliminary dilatation, meet in his practice with an acutely ruptured perineum, only the foolish man will leave it torn. He alone will ruthlessly condemn the poor, fond trusting creature reposing on his want of wisdom to the present sorrows of reflex hæmorrhage, scalding dysuria, delayed convalescence. possible septicemia, arrested sub-involution and the future worry of cystocele, with uterine procidentia and rectal protrusion.

All gynecologists are perfectly familiar with the sad group of symptoms, having as its more pronounced features inability to retain the water and to discharge the fæces; a detestable forcing feeling; a loin languor; wearisome aching in the sacral region and from the vertebra prominens upwards; the peevish and fretful or despondent mood.

In cases of prolapsed bladder, where the unfortunate subject either could not or would not submit to the radical operation for the repair of the perineum, I have been for many years in the habit of employing *Staphisagria* locally to the vesical tumour, and at the same time I like to administer a high dilution of this remedy internally. This latter I prefer doing when the stomach is void. Topically, the drug is best applied in the form of a saturated glycerole. Carefully carded animal wool is a better vehicle for application than cotton; it retains its elasticity when wetted.

The adjacent viscera being emptied and all tight waistbands removed, the patient assumes the salaam or knee-elbow posture. Half-a-dozen tampons in the form of a kite-tail are introduced into the vagina, and packed well up around the cervix during forced expiration. Unless the patient be very silly or very corpulent she soon learns to do this for herself. The vagina should be quite filled with this wool, which is worn during the whole day. In bad cases it is needful to support the perineum in addition by means of a broad thick T-bandage, the horizontal portion of which should be at least three inches wide and should be adjusted to the trunk just below the hip. Similarly the menstrual belt, for obvious anatomic reasons, should never encircle the body above the iliac line, or it becomes a potent factor, com-

bined with a tight corset and with heavy skirts, in adding prolapsus of the pelvic contents at the time when the viscera are heaviest.

I can speak feelingly of the sad success of this treatment as more than a temporary alleviant, because, on more than one occasion women who had decided to let me do perineorrhaphy for them have so sensibly improved under it that, to my chagrin, the operation has been postponed *sine die !*

We will, before taking leave of this valuable drug, glance a little at the rest of its many actions. Most of them are symptoms quite at home in the gynecic note-book. The sad, grey outlook of life; the enfeebled memory; the bursting headache, itching scalp and facial papules; the dilation of the pupils preceded by temporary contraction; the inflamed lids; irritated canthi point, like the similar symptoms in spigelia, to rheumatic, sclero-conjunctivitis. Symptoms 120-30 suggests choroiditis; whilst the scintillating scotoma pertains more to certain deep-seated changes in the intra-cranial circulation.

Tinnitus is recorded by two provers.

Pustulation has been noted in the upper lips and inside the nose. Also the lips are ulcerated on their borders.

The submaxillary symptoms are strangely suggestive of a drug—not much allied to *Staphisagria* -namely, *Mercury*. The same observations hold good of the dental and gingival symptoms. The typical toothache of *Delphinium* is "tearing." The pathologic condition corresponds with periodontitis atrophica, so-called "receding gums."

Herrmann's symptom, "when chewing he feels as if the teeth were pressed deeper into the gums" reminds one of the "sense of elongation of the teeth" in *Phosphorous*.

[Allen's Index gives for "feeling of long teeth," *Chelid.*, *Cocculus*, *Castor* and *Petroleum*.]

The tongue is white, the palate sore, due apparently to herpes; compare *Acetic Acid.*

Three provers had ptyalism (*Conf. Mercury*) heartburn, eructation, hiccough, four times nausea; and actual vomiting occurred twice. *Adipsia* distinguishes *Staphisagria* and *Rheum* from the "thirst" of *Rhus* and the "great thirst" of *Spigelia*.

The flatulent colic of *Staphisagria* is intensified by urinating, distinguished from that of *Rheum*, aggravated by movement.

Staphisagria has constipation followed by diarrhœa; *Rheum*, diarrhœa followed by costiveness.

Anal itching is noted in two provers.

The urinary symptoms are numerous and strongly marked; they point as distinctly to prostatic troubles in males as to cysto-

cele in women. The *Staphisagria* tamponade might be used per rectum in the case of males for intractable prostatic hypertrophy.

The itching of the genitals, in both genders, recalls the symptoms induced by *Galipæa cusparia*, usually known as *Angostura vera*.

Old people, we know, are very prone to acute and distressing but quite temporary strangury. Very young practitioners administer dysuric remedies with no result. Older doctors hasten to give a remedy for flatus incarcerated in the sigmoid flexure or in the rectum; they also direct that the nurse apply succussion to the descending colon. I am indebted to my friend, Dr. Richard Hughes, for the valuable hint to administer *Pulsatilla* under these circumstances. It has not failed me yet; should it do so, I shall certainly fall back on *Staphisagria*.

There are nine coryza symptoms, carrying us back again in mind to *Mercury*.

The twelve cough symptoms always aggravated in the case of Dr. Franz by eating (compare *Nux vomica*), point to pharyngitis rather than to laryngitis. Possibly some are, like the "oppression" and "stitches" in the chest, spinal in origin.

The nape and sacrum symptoms we have already noticed; they are very typical of *Staphisagria*.

The upper extremity symptoms ought to yield good results in treating the osteo-arthritis so common in real senility and in the imitation old age of pelvic patients.

Restless nights, disturbed by dreams of remarkable vividness, are naturally followed by drowsy days. As in *Stramonium*, the prover either dreams of murder or encounters some ferocious beast.

The cerebral congestion we may therefore conclude is more arterial than venous.

The rigors are usually adipsic, one prover alone having "great thirst."

The cardiac symptoms, like the perverted sensations in the tongue, resemble the action of *Aconite*.

Case.—Staphisagria in Left Deltoid Myalgia.

Mrs. ———, aged 50, came on July 2, 1888, for recurrent headache since early childhood, *i. e.*, for more than forty years.

The pain is frontal; it corresponds with the distribution of the two supraorbital branches of the fifth pair.

Twelve years ago, whilst nursing, she had a mental shock, which greatly augmented the severity of the headaches. This shock was followed by temporary loss of the senses of smell and

of taste, and by impairment of that of hearing.

The double supraorbital pain has usually recurred at intervals of seven days.

The change of life occurred five months ago.

She also suffers from attacks of acute spinal anæmia, apparently depending on the condition of her heart, and associated with the following symptoms:—First there comes acute temporal pain; this is accompanied by a distressing sense of choking followed by passive pharyngitis. Later in the day there are rigors and a feeling of sickness; then diarrhœa begins, and afterwards she becomes intensely drowsy. Usually there is complete arrest of urine. Sometimes she has palpitation, with panting breath. She has been prone to these attacks from her girlhood.

For the cold stage *Veratrum album* in the third decimal dilution was recommended, and it gave marked relief. The extreme drowsiness was successfully combated with *Papaver somniferum*, thirty centesimal.

Inhalations of *Moschus*, matrix tincture appeared to relieve the dyspnœa, and also the palpitation, for which I afterwards gave *Asafœtida* in the twelfth centesimal with some advantage.

But to *Lachesis* is due the credit of curing this remarkable case. In dilutions, varying from 6 to 30, it swept away the headache, aggravated by movement and by noise, but even more by light. Whilst taking the *Trigonocephalus* she also lost the giddiness, the noises in the head, the flushing, dry mouth and throat, loss of appetite, epigastric sinking and abdominal flatus, dyspnœa, tickling cough, and the palpitation, occurring both on exertion and after excitement.

Under the influence of *Lachesis* this patient enjoyed five months of immunity from headaches which had, before taking the remedy, recurred once a week for forty years. The other attacks, viz., those of acute cerebro-spinal anæmia, had lasted during five-and-twenty years, recurring at intervals of about two months. Latterly they had become much more frequent, leaving only three weeks of freedom from the distressing disturbance.

These also ceased to afflict her, and she had singularly good health with one exception, which we shall presently notice, during the remainder of the year.

The only adjuvants employed were gentle continuous current to vagus; upward electro-massage to lower extremities and to the respiratory muscles. Of course the patient, who respired very imperfectly, was taught to breathe. Allowance having been made for the beneficial effects of these auxiliary measures, the rest of the credit remains with the venom of the Indian snake.

This patient, on 25th October, 1890, again made her appearance at my rooms, looking much improved in appearance. She had lost her look of distress and had put on flesh.

She now complained of a severe aching pain from the left elbow to the left shoulder. This pain quite prevented the use of the left arm at its upper part; it grew worse in bed.

The biceps, the brachialis anticus and the deltoid were the chief muscles involved, all supplied, as you know, by the musculo-cutaneous nerve, the external branch of the outer cord of the brachial plexus. There was no impairment of reaction to the various muscular stimuli.

The biceps and the brachialis anticus made a slow recovery under *Baptisia*, *1x*, *apis 6*, *rhus 12* and *sulphur*, *30*, selected from subjective indications.

The patient lived at a considerable distance. Owing to this fact and to the extreme inclemency of the weather, I saw very little of her, but she sent an occasional report. Thus I heard that while the other muscles had recovered their normal state, the deltoid hung fire and inflicted a good deal of pain and loss of rest till the end of March.

I was then preparing this drug as a contribution to the American Congress, when I was struck with the similarity between the whole group of this worthy woman's symptoms and the complete pathogenesy of *staphisagria*.

So I wrote a prescription for *staphisagria* twelfth centesimal, to be taken before each meal. The same remedy was given in the first decimal dilution at bed time.

The deltoid was well rubbed with *oil* of *stavesacre* twice a day.

The last part of the prescription had to be suspended on account of the free appearance, after its use, of a red, itching eruption resembling *lichen urticatus*.

The *staphisagria* was prescribed on 24th of March of this year, the deltoid pain having persisted for nearly six months.

It disappeared, while taking *staphisagria*, in seven days, and up to the present time it shows no sign of returning.—*Monthly Hom. Review*.

CAN WE INCREASE THE POTENCY OF THE REMEDY BY DILUTING THE DRUG?

An important fact bearing upon this question has resulted from some investigations in the principle of the fluorescence of liquid solutions.

It is understood that this appearance in certain solutions is due to the chemical rays of light being rendered visible by a change in their refrangibility. The molecules suspended in the liquid alter the conditions of the ray of light so that the length of the waves is increased, while its velocity of undulation is diminished.

Some experiments recorded in the Journal of the Chemical Society, June, 1889, show that the fluorescence of a liquid increases without limit as the dilution increases. In the case of the ammonium salt of fluorescein, the fluorescence of a concentrated solution is zero, or at least too small to be observed. When water was gradually added, the fluorescence first attained a measurable value for a concertration of 1 in 25, and rapidly increased with further dilution until the concentration was reduced to 1 in 3,200, after which it remainded constant as far as the observations extended, namely, to a concentration of 1 in 6½ millions. Similar results were obtained with an alcoholic solution of *Magdala red*, except that it was impossible to obtain very concentrated solutions of this substance, so that it was impossible to observe the beginning of the fluorescence. This fact that fluorescent liquids lose the power of fluorescence when they become sufficiently concentrated suggested to another observer that possibly the groups of molecules existing in the solid salt are only partially dissociated in the concentrated solution, but become more and more so with increasing dilution, until, when the fluorescence is no longer affected by further dilution, the dissociation is complete. This hypothesis is strengthened by the fact that solution of fluorescein and eosin in water have their fluorescent power increased by heat, the effect of which would be to increase their solubility, whilst on the other hand, an alcoholic solution of *Magdala red*, which is less soluble in hot alcohol than in cold, has its fluorescent power diminished by being heated. This also explains the well-known fact that an aqueous solution of *Magdala red*, which is more soluble in hot water than in cold, acquires fluorescent properties when it is heated, although it does not possess them when cold.

These facts prove that dilution of a soluble substance produces a breaking up of clusters of molecules, which, under ordinary circumstances, would exist as aggregations, and it does not appear impossible that the separated molecule may find its way through the numerous barriers which are exposed between the digestive canal and the nerve centre it is designed to influence, when the molecules, in their aggregate form, would fail to reach it, and be thrown back and excreted. That in profound constitutional disorders the higher dilutions succeed where all other remedies

have failed is a fact recognized by all who have employed them, and that there is a purely physical cause for this becomes clearer as our knowledge of the physics of solution and the fuuctions of the human body increase.—*Dr. Percy Wilde in Monthly Homœopathic Review.*

HOT WATER AS A REMEDIAL AGENT.

Moist heat as a therapeutic agent has not received the attention from medical writers that its merits deserve. In the future the remedial effects of hot water are destined to play an important part in the relief of pain and the cure of desease.

It is not necessary to allude in this paper to the use of hot water as a surgical dressing after amputations, as that subject has been ably treated by Dr. Varick, of New Jersey. In the writer's opinion, hot water is excelled in such cases by dilute alcohol only.

In some cases of cholera morbus copious draughts of hot water, conjoined with injections of the same, will afford marked and speedy relief. For many years past the writer has used this treatment with such good effect that in some cases it was unnecessary to prescribe any drug whatever—even the usual hypodermic injection of morphine being dispensed with.

In a case occurring some years ago, the patient had been vomiting for three or four hours when the writer saw him. The cramps had become severe, causing him to utter agonizing cries. To relieve the severe straining produced by the vomiting, he was directed to take a large drink of water as hot as could be swallowed. This being ejected after a little while, a second draught was given which put an end to the emesis. As the attack had been caused by imprudence in eating, and as the bowels had not been moved, a large injection of very hot water was then thrown into the bowels. In a short time this was passed by stool, after which the injection was repeated. Relief from the cramps was speedy and permanent, and although I had charged my hypodermic syringe with one-fourth grain of morphine, I withheld the use of it for the time being, intending, as soon as the pain and cramps returned, to control them in the usual manner. The patient, however, soon sank into a sound sleep from which he awakened free of all trouble, except the debility and soreness that follow such attacks.

Since then I have pursued the same course of treatment in

many cases, and although I have been compelled to use morphine hypodermically in some of them, yet the hot water has always proved a reliable adjunct in the treatment.

In cholera and cholera morbus, the cramps are supposed to be caused by the blood parting with its watery portion, thus sadly interfering with the general circulation. This being the case, it is plainly our duty to restore water to the blood as speedily as possible. Water is much more readily absorbed by blood vessels when it is warm than when cold. By introducing hot water into the bowels as well as the stomach a large absorbing surface is reached by the fluid. In addition to this the effect of the heat on the terminal branches of nerves acts beneficially upon the circulation by stimulating the heart to increased action.

I have no doubt but that in Asiatic cholera hot water properly used will be found of more service than any other treatment. Given by the mouth and by injection through a rectal tube, it would, in my opinion, have a marked effect in bringing about reaction in severe cases; at least it is certainly worthy of a trial.

In cases of cholera that have passed into the stage of collapse, and, when under ordinary treatment, no hope can be entertained of the patient's recovery, I would not hesitate to make a small incision through the linea alba and flood the peritoneal cavity with hot water. The peritoneum absords water with great rapidity, and in cases of profound shock following operations upon the abdominal and pelvic organs, no other means acts as speedily and efficiently in restoring the circulation as does flooding the peritoneal cavity with hot water.

In the collapsed stage of cholera, where the pathology of the disease may be attributed to dehydration of the blood, it seems plain that to restore water to the blood as speedily as possible should be the main object of treatment. In such cases no organic lesions have occurred in any of the viscera of the body, but they are in a condition to resume their functions when their normal stimulus is applied to them. Hence, if the fluidity of the blood be restored, and if the heart be artificially stimulated for a while by electricity, it would seem that death might be averted. These indications can most likely be met by taking hot water into the stomach, by injecting it in large quantities into the bowels, and in extreme cases, by flooding the peritoneal cavity with it.—*L. J. Woollen in Medical Record.*

Calc. Carb. Sour taste in the mouth, or of the food, sour vomiting, especially with children during dentition; also sour diarrhœa. HERING.

A NOTE ON THE EFFECT OF MERCURY ON THE ELECTRICAL CONDITION OF THE HUMAN BODY.

In the heroic days of old, when the maxim "salivation is salvation" was accepted as the beginning and end of the medical art, it was well recognized that the patient, who was undergoing a course of mercury for the supposed salvation of his body, ought to be very careful not to expose himself to cold. Aggravation from cold, and especially cold and damp, is one of the recognized characteristics of the mercurial condition. All this points to an unstable condition of the bodily electrical equilibrium—a too great readiness of the body to discharge its own electricity, and to receive shocks from without. This is quite in keeping with the fact that mercury is itself one of the best conductors of electricity known, and is much used by electricians on that account. When taken into the human body it makes the body a good conductor like itself.

A case has lately come under my notice in which this property of mercury was apparently very strikingly illustrated.

M. B., a parlor maid, had used for toothache a solution of *Merc.-cor.*, 3x, rubbing it on the affected gum. She had used in all about a drachm, when in a day or two symptoms of mercurial poisoning supervened. The symptoms, which were very severe and lasted off and on for more than two months, will be published in full later on. I only wish to refer here to one circumstance.

One part of her duties consisted in cleaning electrical lamps. For this purpose she had to remove the lamps from their cups and after dusting to return them. This she had done for many, many months without any accident, but when under the mercurial influence she noticed that on touching the bases of the lamps, where they are connected with the wires, she received a shock of electricity and the lamp exploded. This happened on three or four occasions before she mentioned the circumstance to me. At first I could hardly believe that there was any connection between the mercury and the explosions of the lamps; but I advised her not to touch them again for a time, and meanwhile made inquiries of practical electricians.

From them I learned that it was quite possible from the touching of the poles of a lamp that had been used to set up what is called a "short circuit" current from the lamp to the person, and from this to result in the breaking of a lamp.

An electrician, now holding an important position in one of the chief firms of electrical engineers, informs me that when he

was engaged in the electric lighting of the Health Exhibition he became poisoned by the mercury there used. His hands were frequently in the troughs containing the quicksilver. Before that time he could stand a very strong shock of electricity, but the mercury wrought a complete change in him in that respect, and now the slightest shock affects him powerfully.

This tends to confirm the supposition that the mercury poisoning in my case had to do with the lamp explosions. After some weeks, though not free from symptoms, the patient found that she could handle the lamps as freely as before without any accident.—*John H. Clark, M.D., in Hom. World.*

SAW PALMETTO IN PROSTATIC DISEASE.

I have been afflicted with that most distressing of old men's troubles, enlarged prostate, for four or five years, and for three years previous was obliged to use a catheter from two to six times in twenty-four hours. A year ago last July I had a short respite of a month or so, and thought I had succeeded in overcoming the difficulty, but it was only partial and temporary, and I had to resort to the catheter again. I had been using rectal suppositories of *Ergotin, iodoform and belladonna*, various internal remedies—*Staphisagria, carbonate of lithia*, etc.—and locally *cocaine ointment*, etc., applied to the catheter. In March last I commenced using the saw palmetto, when I began to improve, and by the first of May was so much better that I omitted the use of the catheter, and have not used it since until about the first of this month—over six months' respite, the longest in over four years.

I was so well that I became negligent in the use of the remedies, and so suffered myself to become constipated and lithemic, causing cystic irritation and spasm at the neck of the bladder, requiring the catheter a few times.

A few doses of cascara sagrada for the bowels, carbonate of lithia and pichi for acid urine and irritation of the bladder, and resumption of the saw palmetto for the prostate gland, soon corrected all the unpleasant symptoms, and now all is right again. I find it necessary to keep the bowels regular as possible to avoid pressure from gas or impacted fæces on the gland and neck of the bladder, also to be somewhat careful of diet, to prevent lithemic symptoms. Although the cystic troubles was relieved by the former remedies,

I am satisfied that the gland remained congested and inflamed till I began the use of the saw palmetto, and since then has materially lessened in size and is relieved of its tenderness and inflammation.—*H. Knapp, M. D., in Medical World.*

BARYTA CARBONICA.

More than thirty years ago I had been experiencing for some time a peculiar affection of the left leg—I believe it was the left, though I can be hardly sure at this distance of time—a pain would suddenly come on, beginning in the hollow of the knee, and running down the back of the leg. I could compare it to nothing but a thin stream of hot fluid—boiling water or molten metal, running down under the skin. As time went on, this increased in intensity, as well as in frequency; and one day, while I was sitting writing, it was coming on repeatedly, and with greater violence than usual: I happened to have a small bottle of globules of *Baryta Carbonica* close at hand, and in a freak of fancy, and far from expecting that they would do any good, I took a few of them. To my surprise, however, almost as soon as the globules had touched my tongue, the pains entirely ceased, and they did not return again for a long time, and then only slightly, when a few more globules freed me from the pains from that time to this, that is for more than thirty years. I do not know whether the affection above described is a known or a common one, but if it is, the above information may be of use; and my haphazard experiment seems to reveal an unknown property of *Baryta Carbonica*, for I find nothing in Jahr's symptomatology of this remedy that would lead to this use of it.—*F. H. B. in Hom. World.*

VETERINARY DEPARTMENT.

"Sulphur's Good in all Forms."

Thus declaimed the talented Marsden, M. D., when, the Ledbury fox-hounds being then in full cry (having just picked up the lost scent),.he took a flyer over a bullfinch at the one

side of the five-barred gate through which your humble correspondent rode on his mare. This was in March, 1866.

In the preceding November the said valuable, clever mare broke out of her stable and remained lost during a 10-day rainfall. Shortly after her capture a sharp attack of fever ensued, followed by an aqueous infiltration of the subcutaneous tissue involving chest, abdomen and legs; while a crop of hard elevations appeared in the skin surface.

The local "Vet." called her ailment "Water Farcy;" of course *his* treatment made bad matters still worse. *Bell.* and *Nux.* removed the fever and loss of her appetite, but the chronic malady remained *in statu quo.* A happy thought led to my placing inside her lips a few grains of *Sulph. precip.* 1x; in a few minutes she voided gallons of black urine, and in a few days was well. A recital to Dr. Marsden of the case caused the above remark from him *in re* the curative remedy. But the malady returned every succeeding year, and at the some period; always yielded to the same drug and with the same crisis of urine.

Dr. Marsden possessed a marvelous intuitive power of perception from the hue, expression, &c., of a patient's countenance, in diagnosing the nature *and the cause* of the malaise; but, as with every instance of innate genius, he rather lacked stability. Malvern (like Leamington to Jephson) proved to Dr. Marsden the fickle character of the professional connection, &c., ultimately to be experienced at (at one time popular) health resorts.—*Agricola in Homœopathic World.*

Lameness of the Shoulder in a Horse.

The landed proprietor H., in W., bought a five-year-old horse that was afflicted with a chronic lameness of one shoulder. The lameness was better after moderate exercise, but after hard work, or during rest, it was worse. There was a considerable wasting of the muscle to be observed around the shoulder blade. *Ferrum Mur.* 15th potency, dissolved in water and administered every four hours, a tablespoonful on a piece of bread, effected a cure within six weeks. On the 8th day of the treatment a considerable aggravation of all symptoms was observed, which was followed by relief, ending in a perfect cure. The horse was hard worked for over two years following, and the cure, therefore, must be admitted to be permanent.

Wound in the Chest of a Dog.

A stable dog, two years old, was said to have been stabbed in the chest with a pointed instrument by a miscreant. Question arose whether the animal could be saved. Investigation dis-

closed a wound between the second and third ribs, round, half an inch broad and over five inches deep in the direction of the lung. The mattery discharge from the nose indicated that the lung had been pierced. Appetite was poor and the dog had grown thin. I was compelled to probe the wound with a willow twig as my leaden sound was not long enough. The discharged matter was rather thin. I closed the wound with a cross-suture leaving a small opening for the discharge, and applied externally a lotion of one teaspoonful of Homœopathic *Arnica Tincture* to one-half pint of soft water. The internal application consisted in a few doses of *Arnica* 6x in some milk. The discharge from the nose ceased on the seventh day, his spirits rose, his appetite increased, the wound closed slowly, the sutures coming out after a few days, but in three weeks the wound was closed entirely and the dog seemed to be in as good condition as ever.—*Dr. Kleemann, Veternarian, Switzerland.*

An Angora Tom Cat, a beautiful animal, a good mouser and ratter, sickened one day; he would not eat and did not attend when called. I noticed that he had one watery stool during the day. On the second morning his neighborhood was soiled to such a degree that evidently the diarrhœa had increased during the night. Tom lay there in a perfect apathy and his body felt cold to the touch. I gave him three pellets of *Arsenicum* and about noon of the next day he ate some food and was soon as frisky as ever. Convulsions in cats can readily be cured by a few doses of *Belladonna* 3.

Stringhalt in a Mare.

A fine black mare, æt. 8, was troubled with stringhalt in the left hind foot. On being turned short she would jerk up her leg about 6 to 8 inches; otherwise she seemed to be in good condition. In Herring's "Condensed Materia Medica" we find mentioned under *Arsenicum Alb.* "*Cressus Gallinaceus*," the Latin term for stringhalt; the 15th potency of that remedy was given, morning and evening, and the whole leg was washed every evening with tepid water in which a few pellets of the same remedy had been dissolved. After two weeks every vestige of the complaint was gone.—*A. J. T.*

Rheumatic Affection of the Eyes in a Horse.

On June 9. '75, a fine 15-year-old stallion, a Hungarian, was affected with a rheumatic inflammation of both eyes. The horse was dispirited, hung his head and by his tightly closed eyelids and the profuse lachrymation, as well as objection to having the lids opened, evinced potophobia and great pains. The cornea

was dull, covered, as by a grayish vail with injection in the corners. These symptoms did not yield to *Mercur sol.* 3, administered twice daily, but in addition to the enumerated symptoms he now evinced a desire to rub his eyes against any convenient substance, no matter how tied, even against the halter if no other surface was handy. This symptom induced me to give him *Tinctura Sulphuris* 3, which acted so promptly that on the second day he ceased to rub his eyes and within a week the whole affection was gone and has not returned to this day. (October, '76.)

THE LOCO WEED.

The loco weed of the Western plains is to vegetation what the rattlesnake is to animal life. The name comes from the Spanish and signifies insanity. It is a dusky green and grows in small bunches or handfuls and scatters itself in a sparse and meagre way about the country. It is in short a vegetable nomad and travels about not a little. Localities where it this season flourishes in abundance may not see any of it next year, nor indeed for a number of years to come.

The prime property of the loco is to induce insanity in men or animals who partake of it. Animals—mules, horses, sheep and cattle—avoid it naturally, and under ordinary circumstances never touch it. But in the winter, when an inch or two of snow has covered the grass, these green bunches of loco standing clear and above the snow are tempting bits to animals which are going about half starved at the best. Even then it is not common for them to eat it. Still, some do and it at once creates an appetite in the victim similar in its intense force to the alcohol habit in mankind.

Once started on the downward path of loco a mule will abandon all other forms of food and look for it. In a short time its effects become perfectly apparent. You will see a locoed mule standing out on the shadowless plain with not a living, moving thing in his vicinity. His head is drooping and his eyes are half-closed. On the instant he will kick and thresh out his heels in the most warlike way. Under the influence of loco he sees himself surrounded by multitudes of threatening ghosts and is repelling them.

The mind of the animal is completely gone. He cannot be driven or worked because of his utter lack of reason. He will go

right or left or turn around in the harness in spite of bits or whip, or will fail to start or stop, and all in a vacant, idiotic way devoid of malice. The victim becomes as thin physically as mentally, and after retrograding four or five months at last dies, the most complete wreck on record. Many gruesome tales are furnished of cruel Spanish and Mexican ladies who, in a jealous fit, have locoed their American admirers through the medium of loco tea. Two or three cases in kind are reported in the Texas lunatic asylum.—*Kansas City Star.*

BOOK NOTICES.

AN IMPORTANT WORK.

There is a great difference of opinion on the subject of Homœopathic Materia Medica and probably always will be. On the one hand are those who would not part with a single symptom from those overflowing works like the *Materia Medica Pura* or Allen's great *Encyclopædia*, and on the other are many busy men who, while firmly believing in the law of Similia, yet frankly confess the impossibility of memorizing that innumerable collection of symptoms; they say these symptoms, as at present arranged, while containing the Homœopathic truth, are stuffed out with much chaff, and they want the chaff winnowed out and the substance presented in a well arranged manner—nothing omitted that has been verified beyond doubt and nothing put in that is at all doubtful. In short, the cry is for a Practical Materia Medica.

It is a pleasure to make the announcement that the demand is about to be supplied. On page 147 of this issue of the RECORDER will be found a paper by Dr. A. R. McMichael, read before the Homœopathic Medical Society of the County of New York, April 9, 1891, which, while the work itself is not mentioned, yet describes the work on which Dr. McMichael has been engaged for many years. The usual method, as is well known, and against which not a word is to be said, is to place the name of the remedy at the head of the page and follow with its entire list of symptoms—Moral, Head, Eyes, etc. In Dr. McMichael's forthcoming work all this will be changed, or, to write more accurately, will be re-arranged.

His book will be a large quarto. The names of the remedies will be found following each other on the outer margin of the left-hand page. Along the top of the two pages, and running across both are the following heads: 1. STOMACH. 2. APPETITE AND THIRST. 3. TASTE AND TONGUE. 4. CONCOMITANTS. 5. MOUTH AND TEETH. 6. NAUSEA AND VOMITING. 7. ERUCTATIONS AND FLATULENCE. And then in the last column of the right-hand page as the book lies open will be found CLINICAL.

The first word at the top of the page, STOMACH, gives the key of the whole. The title of the new work will be *A Compendium of Materia Medica, Therapeutics, and a Repertory of the Digestive System.* Each disease has a centre or seat. The stomach is the centre of a vast number. This book will give the whole of the VERIFIED *Homœopathic Materia Medica*, as it applies to that organ, together with the concomitants, and Therapeutics, etc., as noted in the list given above.

The distinctive feature of the forthcoming work is now apparent. A physician has a case centering in the stomach—this volume gives the whole that applies to that case, and stomach cases generally, but nothing more. The repertory at the end is of the most complete and exhaustive character, and so arranged that the searcher is guided *at once* to what he wants. For instance, the symptom "Retching vomiting with diarrhœa and colic," will be found in the Repertory under the key words: "Colic," "Diarrhœa," "Retching" and "Vomiting." These key words stand out at the edge of the text of the repertory in such a manner that the physician can run down what he wants with the most rapidity.

From the foregoing it will be seen that the promised work while complete in itself does not cover the whole body, but is confined to the digestive system. There is but little doubt that other works, each complete in itself, will follow this one immediately. The manuscript of the entire series is complete.

As soon as possible specimen pages will be prepared by the publishers and forwarded on request. That the new undertaking will be a success—a great success—there can hardly be a doubt. Many who have studied the plan have said, in substance: "Just what I have been looking for all my life." It is estimated that the volume under consideration with the repertory will make a book of about 400 pages, more or less.

A Homœopathic Bibliography of the United States from the Year 1825 to the Year 1891, Inclusive, containing alphabetical lists of Homœopathic Books, Magazines and Pamphlets.

Also, condensed statements, data and histories of the Societies, Colleges, Hospitals, Asylums, Homes, Nurse Schools, Dispensaries, Pharmacies, Publishers, Directories, Legislation, Principal Books against Homœopathy, and Homœopathic Libraries. Carefully compiled and arranged by Thomas L. Bradford, M. D., Philadelphia, Pa.

Some days since a physician wrote to Dr. Bradford, the compiler of *The Homœopathic Bibliography*, inquiring as follows:

"Can you give me information in regard to the following: In *Hufeland's Journal*, for 1796, there appeared a paper entitled 'Suggestions for Ascertaing the Curative Power of Drugs.'

"Is it possible for you to tell me whether or not Hahnemann was the author of that paper? Is it likely that he was? Was Hahnemann writing for *Hufeland's Journal* in that year?"

The following answer, from Dr. Bradford's MSS., was given:

"1796. Versuch uber neues Prinzip zur Ausfindung der Heilkräfte der Arzneisubstanzen nebst einigen Blicken auf die bisherigen. Von Samuel Hahnemann."

An essay on the new method of discovering the Curative Powers of Medicines; and a criticism on the means previously employed. *Hufeland's Journal*, Vol. II., pages 391, 465.

The article was issued in two numbers of the *Journal* and the above title is correct.

Hahnemann *did* write for *Hufeland's Journal* frequently at this time, from 1796 to 1806, and his name nearly always appears in connection with his articles. The article in question occupies about 100 pages of the *Journal*, which is a duodecimo.

Dr. Bradford wishes us to say that he will at any time be glad to have any historical matter in connection to his publication tested.

And in a work of this size and scope it is very difficult to obtain correct information upon all points.

Authors of pamphlets, issued during the past year, (magazine reprints included) are requested to send a copy to Dr. Bradford in order to secure correct representation. He has written a great many letters to authors, in order to verify the correctness of his information, and is now quite willing to furnish a list of his works to any author who will return it corrected.

Only titles of the books and pamphlets by American Homœopathic physicians will be published, with the exception of all of Drs. Hahnemann's and Herring's works. Also the titles of the works by American laymen in reference to Homœopathy in the United States.

Although the work will not be brought out until the latter

part of the year, yet now is the time to send in subscriptions, that some definite limit can be fixed for its completion.

The price of the *Bibliography* is three dollars and all friends of Homœopathy are invited to send in their subscriptions in order to insure its publication. Address either Dr. T. L. Bradford, 1862 Frankford Road, Philadelphia, Pa., or any of Boericke & Tafel's pharmacies.

A Clinical Text-book of Medical Diagnosis for Physicians and Students. Based on the most Recent Methods of Examinations. By Oswald Vierordt, M. D., Professor of Medicine at the University of Heidelberg. Authorized translation from the 2d German Edition by Francis H. Stuart, A. M., M. D. W. B. Saunders, Philadelphia, 1891. 700 pages. Cloth, $4.00. Sheep, $5.00.

The author, Dr. Vierordt says of his work, 1st edition: "I have here, as well as in my teaching, taken pains to emphasize that, besides availing ourselves of the constantly increasing finer methods of diagnosis, the simple ones of our senses, especially of the unaided eye, must not be forgotten. Still more the manifold labors with the microscope and in the laboratory ought not to permit the physicians to forget that a preparation or a chemical reaction is not enough for a diagnosis, but that the whole organism must always be brought under consideration. In other words, in diagnosis as well as therapeutics this rule is imperative: We must *individualize* the case. Should this book to any extent antagonize the inclination of our time to theorizing, it would afford me especial satisfaction." In his preface to the 2d, edition the author says many of the sections have been entirely re-written, all revised and some new matter added. The translator on his part says: "The work of which a translation is here offered is one of the best that has been written upon the subject. When it first came into the hands of the translator he had no thought of ever using it except as a work of reference. But as he read it he became convinced that it had such merit that it would certainly be welcomed by a large class of readers if it were rendered into English." The book is divided into three parts, eight chapters and an appendix. The index is very complete, occupying eighty pages.

Homœopathic Recorder.

PUBLISHED BI-MONTHLY BY

BOERICKE & TAFEL,

1011 Arch Street, Philadelphia, Pa.

9 North Queen Street, Lancaster, Pa.

SUBSCRIPTION, $1.00 PER ANNUM.

Address communications, books, etc., for the Editor to E. P. Anshutz, P. O. Box 921, Philadelphia, Pa.

THE RECORDER makes no pretentions at being a news journal, and hence has no report of what was said and done at the great meeting of the American Institute at Atlantic City. Our big Philadelphia and New York contemporaries will contain full reports, no doubt. Suffice it here to say that the meeting was in all respects a great and successful affair; the attendance was very large, the number of new members taken in was large, the weather was fine, and nothing occurred to mar the harmony of the occasion. The Philadelphia newspapers contained very full reports of the meetings each day, which is a good pointer to the interest the general public took in the event. Had the public felt no interest in the doings of this representative body of Homœopathy the newspapers would have passed the meeting with a line or two.

When the Transactions are out we hope to give our readers a bird's-eye view of the papers that pertain to drugs and their uses.

THE man who glowers over the subscription book of THE RECORDER, courteous reader, says "Pay up! Pay up! Pay up!" The fact that the great majority of you have paid up does not satisfy him. He has his eye on a sort of skirmish line of non-payers and they trouble him. The subscriber who doesn't pay up is always the thorn in the side of the man at the subscription book and tends to make him misanthropic. The fact that nine men have paid up does not in his biased eyes excuse the recalcitrant tenth man who will not pay, or who forgets to pay as is probably most often the case.

The foregoing to satisfy the man at the subscription book—a sop to Cerberus—but don't forget that with all his crustiness he has a little ground for grumbling.

IN the November, 1890, number of THE RECORDER, a paper was published from the pen of D. N. Ray, M.D., Calcutta, India, on the remarkable curative powers of *Blatta orientalis* in

chronic cases of asthma. A small supply of the remedy was sent at the time but not sufficient to meet the demand. Messrs. Boericke & Tafel then ordered a new supply and this has arrived. The transportation, duty and apparently inevitable loss by breakage makes these far off remedies come a little high.

DR. SCUDDER, the veteran Eclectic, pokes a little fun at his Homœopathic brethren, or some of them, in the following manner:

"Our neighbors have been rejoicing for months that the truth of Homœopathy has been proven by the new cure for tuberculosis. Hardly a journal in the land but has had something to say about it, and some have said a good deal. Of course it proved the truth of their law, *Similia similibus*. It went further and proved the value of infinitesimals. And still further, it proved the value of *nosodes*, the dirty part of homœopathy.

"And now our sound homœopathists may exclaim, 'The Lord save me from my friends; I can take care of my enemies.' The entire Koch business has proven a failure; not one patient has been cured, but scores have died from it. Is Homœopathy to be measured by this standard? It may be *Similia*; it is certainly a very vile *Nosode*, and hundreds have had the tubercular bacillus distributed in their tissues by it, and others have suffered from the effects of the most poisonous ptomaine ever known. How does the Homœopathic *Nosode* business compare with this?

"As you look the field over, my friends, do you really think you have made anything by appropriating *regular* thunder? I imagine that you had better stick to the legitimate, and to that you know. When you try to become "scientific by riding a bacterium, or appropriating a *regular* nosode, you are likely to make a failure. It is not my province to advise you, but many of you are clever men and co-workers, and I cannot help saying, stick to the truths you know, and don't toady to the 'regulars.'"

DR. MCMICHAEL'S paper in this number is worthy of careful study, and his new Compendium, announced among our book notices this month, should command wide attention. It is something new, something practical, and something that many physicians have been demanding for a long time. That the plan of the new work will not please every one goes without saying, but that it will please the greater number of the steady paced, loyal Homœopathic practitioners, is almost inevitable. Many of these have carefully examined the plan of the forthcoming work and have given it unqualified praise. It is a work that all should look into.

THE

HOMŒOPATHIC RECORDER.

VOL. VI. PHILADELPHIA AND LANCASTER, SEPT, 1891. NO. 5.

BLATTA ORIENTALIS.

In my last paper on *Blatta orientalis** I promised to say more on this subject in future, so, to-day I begin to fulfil my promise. Before I proceed to give the cases of Asthma in which *Blatta orientalis* was used with great success, I should like to say something about Asthma. This spasmodic disease which is characterized by the urgent dyspnœa due to the bronchial spasms, may be principally divided into Idiopathic and Symptomatic. The spasms in the former case take place through the efferent nerves by the direct irritation of the brain or the spinal cord independently of any other distant affections, and this variety though rare is the most difficult to combat. While in the latter case, which is by far more common, the causes of the irritation of the nervous centres are in distant organs, that is, the nervous centres are secondarily affected. Stomachic Asthma originates in the derangement of the stomach; Cardiac Asthma, not Cardiac dyspnœa in which there are no bronchial spasms, originates in the diseases of the heart, and lastly Bronchial Asthma, which is the most common of all, is due to the morbid condition of the bronchial tubes in which the bronchial spasms occur through the reflex action. A fit of Bronchial Asthma may be excited by the inhalation of materials such as smoke, pungent vapours, animal or vegetable emanations, dust, pollen, drugs, fog, effluvia of domestic animals, as rabbits, dogs, guinea pigs, horses, etc. Change of weather, locality, winds, such as easterly wind, are no less an exciting cause. The most common exciting cause of an attack of Asthma is inflammation of the bronchial mucous membrane. There are other organs which may be primarily affected, giving rise secondarily to an asthmatic attack, such as a loaded rectum, intestinal worms, uterine diseases or sudden chill, etc.

I shall only say a few words as to the character of a paroxysm of Asthma. The paroxysm occurs periodically at regular or ir-

*See RECORDER, Nov. 1890, page 254.

regular intervals, it may be daily, weekly, monthly, yearly, or at a still longer interval. There are cases where a severe cold, frequent sneezing, running from the nose, a short, dry, wheezing cough, etc., are the forerunners of a severe paroxysm, but in most cases there are no premonitory symptoms and the patient is suddenly seized with an attack. The early morning hour, say from 2 to 4 A. M., after a good sleep, is the time when asthmatic persons in a majority of cases are attacked with paroxysm, although an attack may take place at any time of the day. When the paroxysm is developed the patient experiences great oppression and tightness of the chest, with extreme sense of suffocation, and breathing becomes labored and gasping. Patient assumes either a sitting, standing or kneeling posture, frequently changing attitude in seeking relief; puts off all tight clothing to give the chest a free scope for easy respiration. The inspiration becomes short and abrupt while the expiration is greatly prolonged. The respiratory sound is greatly exaggerated, so much so that the wheezing is distinctly audible to the bystanders; perspiration generally pours out freely; the face becomes pale and anxious; pulse small and quick. I need not detail these symptoms as every physician must have seen the great sufferings of an Asthmatic patient during an attack.

There is no rule as to the duration and the termination of an attack, it may end suddenly within a few minutes or gradually with remission or intermission, but in most cases there is a cough at its close, with more or less *pearly* mucous expectoration—the characteristic asthmatic sputa. There are cases in which there is no secretion from the first to the last, and the spasms disappear without expectoration. The cough at the termination of an asthmatic attack is very often troublesome and paroxysmal; with each spell the patient goes on coughing and hacking until some sputum is brought up, when he experiences great relief till the next fit of coughing. These coughing fits are very oppressive and fatiguing to the patients, owing to the difficulty in raising the tenacious sputa, and you will often hear the sufferer begging you to make his or her expectoration free. You will find *Blatta orientalis* a capital remedy in relieving this kind of cough. *Blatta ori.*, when given in repeated doses at the commencement of an asthmatic attack, cuts short the paroxysm within a short time; so .I am inclined to think it affects pre-eminently the pneumogastric nerves in thus relieving the spasm of Asthma. Here its action is similiar to *Arsenicum alb.*, *Ipecacuanha*, *Cuprum*, *Lobelia infl.*, etc. As it makes the expectoration free and coughing fit less frequent and less severe, here

again its action is similar to *Antimonium tartaricum*, *Ipecacuanha*, etc.

I have of late tried *Blatta orientalis* indiscriminately in almost all cases of Asthma that have come under my treatment, and I am glad to say I have received good results in most cases, as the reports of some of the clinical cases will show. I have not come to any definite use of this drug yet, but I shall only mention a few facts that I have observed during its use. It acts better in low potency and repeated doses during an attack of Asthma; when the spasm subsides, the terminal asthmatic cough with wheezing and slight dyspnœa, etc., is better relieved with higher potencies; the low potency, if continued after the spasmodic period is over, will make the cough more troublesome and harassing to the patient and the expectoration tenacious, thick and very difficult to raise, but this will not be the case if the potency is changed. I had this difficulty in a few cases when I was less acquainted with the action of the drug, but now I manage my cases better. In four patients who continued the drug for some time in the low potency during the paroxysm and after it was over, the cough became dry and hacking with little or no expectoration, the streaks of blood appeared in the sputa, which the patients had never observed in the course of their long illness. This appearance of blood in their sputa, was the cause of a great anxiety to them and made them hurry over to my office. On inquiry I learned from two of them—one a lady and the other a young man—that while taking this remedy they felt a sensation all over the body, for four or five days previous to the appearance of the blood, as if heat were radiating from the ears, eyes, nose, top of the head, palms of the hands and soles of the feet. They attributed this sensation of heat all over the body and the appearance of the blood in the expectoration to the drug. I directed them to stop the medicine at once; this they did, and with the discontinuance of it the blood disappeared from the sputa as well as the sensation of heat, but to me it was an open question whether this appearance of blood in the expectoration was due to overdrugging, although I must say that the presence of the streaks of blood in the sputa of asthmatic patients is not an uncommon phenomenon. I resolved to give the same potency to the same patients after the lapse of some days. I did so and to my surprise the blood-streaked sputa again appeared after they had taken the remedy 1x, one grain four times daily. From this the patients understood it was the same medicine that had been given to them on the last occasion and begged me not to give it again as the appearance of blood

in the sputum frightened them, in spite of all my assurance. No more strong doses of the drug were given to them and they did not notice any more blood in the sputum. I have heard other patients complain of this peculiar sensation of heat whenever strong doses were given to them for some time. It acts better on stout and corpulent than on thin and emaciated persons. The asthmatic patients subject to repeated attacks of Malaria derive less permanent benefit from the use of the drug. So, it seems to me, that in hæmic Asthma, which is due to the abnormal condition of the blood, it is efficacious. I have also used this drug in troublesome cough with dyspnœa of phthisical patients with good result.

Clinical Cases.

CASE 1. Baln R. M., aged fifty-five, thin, emaciated and irritable temperament, has been suffering from hereditary Asthma for the last twenty-five years. For the last six or seven years he suffered from asthmatic fits almost nightly and a troublesome cough with a good deal of frothy expectoration. He said he had not known what sleep was for the last six or seven years, in fact, he could not lie down in bed as that would immediately bring on a violent fit of coughing which would not cease until he sat up, so the recumbent posture for him was almost impracticable, and he used to sit up during the night and doze on a pile of pillows. He passed his days comparatively better, but the approach of the night was a horror to him, his struggle, commencing at 9 or 10 P. M., would last till the morning. He was the father of many children and was well taken care of, but his suffering was so great that he had no ambition to live any longer. He tried almost all systems of medicine without much good. For the last ten years he took *Opium* which afforded him slight relief at the beginning, using as high as forty-eight grains of *Opium* in twenty-four hours. Owing to the constant sitting posture he became stooped, and the back of his neck stiff and painful. On April, 1889, he was suddenly taken ill with fever. The fever became protracted. After an illness of over a month his condition became so bad that all hope of his recovery was given up. During this illness he was treated by an old school physician of some repute, but his condition daily grew worse, the Asthmatic attacks became very violent and almost incessant, and the difficulty of breathing very great. He became so feeble that he had not strength enough to enable him to bring up the expectoration; his chest was full of it; fever was less; there was general anasarca. He was sitting with head bent forward, almost touching

the bed, as that was the only position possible to him day and night. He had become almost speechless, when I was sent for, at about 3 P. M. on the 23d of May, 1889. When I was entering the patient's room a medical man came out and hinted that there was no use of my going in as the patient was just expiring. I found the patient breathing hard; unconscious; jaws were locked and saliva dribbling from the corners of his mouth; body cold; cold, clammy perspiration on forehead; eyes partially opened; in fact, to all appearance, he looked as if he were dead, except for the respiratory movements. I felt his pulse and found it was not so bad as the patient was looking. I examined the back of his chest, as that was the only portion easily accessible, and noticed that the bronchial spasms were going on with loud mucous râle. From the character of his pulse I thought that the present state of the patient was *probably* due to the continued violent struggle and not deep coma, and that he had become so exhausted that he was motionless, speechless and completely unconscious. His bed was surrounded by many friends and relations, who had come to bid him a last farewell; and it was with surprise that they all looked at me when I proposed to administer medicine to a patient, whose death was expected every minute and for whose cremation preparations were being made.'

I got a big phial full of water and put in it *Blatta orientalis* IX trit. a few grains and tried two or three times to give him a spoonful of it, but in vain; the jaws were locked and I could not make him swallow any of that medicine; then I put some powder dry in the hollow of his lips and asked the attendants to try to give him the medicine I left in the bottle. I was asked whether there was any hope of his recovery, of course my answer was "*no*," and I also said he could only live a few hours. I left the patient's house with the idea of not visiting it again, but at 9 P. M. a messenger came with the report that the patient was slightly better, he could swallow medicine and two doses of it had been given. I was asked to see the patient again. I could hardly believe what he said, however, I went to see the patient again. I noticed there was a slight change for the better, the pulse was steady, the jaws were unlocked, there was mobility of the limbs, he could swallow liquid with ease and was expectorating freely, the breathing though still difficult was slightly improved. There was the winking of the eyelids. On the whole he was looking less lifeless, but still I entertained no hope of his recovery. I left instructions to repeatthe same medicine once or twice during the night, if required, at the same time to give milk repeatedly, one or two spoonfuls at a time, and to inform

me next morning if he had survived the night. Next morning I really grew anxious to know what had become of my patient who had shown symptoms slightly better with this new remedy. A messenger came with the report that the patient passed a good night. I was requested to see him again. When I arrived at his place at 8 A. M., I was surprised to see him so much better, he had not only regained his consciousness, but was sitting quietly in his bed, could speak slowly, the difficulty of breathing was completely gone, but the cough occasionally troubled him and a good deal of expectoration of frothy white or sometimes of big yellowish lumps of mucus came up. He was given three doses of the same medicine 2x trit. during the day. He passed a fair day but at night his difficulty of breathing again appeared in somewhat milder form. He had to take two doses of the medicine. Thus the medicine was continued for a week and his trouble daily became less and less until after the expiration of a week he was able to sleep at night for the first time in the last six or seven years. I treated him over a month and his health improved so rapidly that he not only got rid of the asthmatic trouble, but was soon able to go out and even to attend his business. The stooped condition of his neck with slight pain and slight chronic bronchitis did not leave him altogether. Besides *Blatta orientalis*, I also prescribed for him *Arsenicum alb.* 6 and 12, *Naja. tri.* 6, *Ipecac* 3 and *Antim. tart.* 3, as they were indicated. He continued well for over a year, but in August, 1890, he had slight reappearance of the asthmatic trouble. He again took *Blatta orientalis* and got well.

CASE 2. A Brahmoehery (ascetic), aged 38, had been suffering from Asthma for the last fourteen years. During the early part of his illness he used to take medicine, but this would invariably make his case worse, so he gave up all treatment and was left to nature. Occasionally he would wear a *talisman*, a practice much prevalent in this country; this once seemed to do him good, as, at the time, some eight years ago, he was free of all trouble for one year, when accidentally the *talisman* dropped from his body and was lost. This was the beginning of his most severe trouble. During this illness he again made up his miud to try medicine, and took both Allopathic and native drugs, but to no purpose.

Homœopathy was at that time very much in the background, so he did not think it worth while to give it a trial. His sufferings became so great that his life became almost intolerable. He then became an ascetic and left his home and relations to die in some sacred place, as is the custom with many Hindus when they be-

come old or invalid. He knew Sanskrit well and went to Banares, a sacred place for Hindus. On his arrival there, in 1878, he felt somewhat better, either due to the change of place or the change of his mode of life. He became acquainted with the people there, and as a Brahmin and Sanskrit scholar they began to respect him. He improved gradually and entertained some hopes of recovery, but never thought of returning home. He could sing and compose verses—this attracted a good many persons' notice, who not only used to help him with the necessities of life, but would gather round him to pass pleasant evenings. Thus he enjoyed fair health for a year, when his old enemy, the Asthma, made its appearance. This time he was worse than ever, in spite of all means that were adopted to afford him relief.

Four or five years passed in this way and there was no sign of abatement. During the rains and the winter he would be very much worse, that is, nine or ten months of the year he would suffer terribly. At last, in March, 1887, he left Banares for Bombay—a climate more temperate.

In March, 1887, I went to see the man. I heard the whole above account from him and saw he was suffering sadly. On examination I could not detect much accumulation of mucus anywhere in the chest. There was an urgent dyspnœa more or less, almost always present. The dyspnœa would increase with movements, during the latter part of the night and sometimes during the day without any apparent cause. There was no expectoration, nothing wrong with the heart, except the pulse was greatly accelerated. The liver was pushed forward and downward, where it could be easily felt like a big lump, and there was a severe pain in the hepatic region. It was the impression of the patient that this lump was daily getting bigger and was the cause of all his trouble. His appetite was poor, in fact, he used to take nothing but milk his bowels moved daily, and he was much emaciated. As an ascetic he did not wear any clothing on his body, so his chest was exposed equally to heat and cold. It was his habit to bathe in cold water early in the morning throughout the year. He said he would get worse if he were to wear flannel or stop his daily cold water bathing. He tried these means before, but they invariably made him feel heaty and his asthmatic attacks worse. So I thought it was useless to ask him to wear any warm clothing, or to stop his daily bathing, as he was prejudiced against them. When he was asked whether he would take medicine if prescribed, he did not show much eagerness, on the contrary he said that medicine always made him worse and that he would rather not take it.

However, he was persuaded to take the medicine, as he was given to understand that these Homœopathic drugs were harmless. As he began to take the medicine with half-heartedness I thought he would not continue it. I prescribed *Naja trip.* 6, a drop dose every three hours, and more frequently during the severity of an attack. On the first day he felt slightly better instead of worse, as he was predisposed to feel. The same medicine was continued and he began to feel better and better, until on the fifth day there was a complete cessation of the bronchial spasms for some time during the day, and he could move about with ease.

Thus I gained his confidence and he was willing to follow my advice. After some ten or twelve days he came to my office and asked me whether there was any chance of his getting well and what were my directions to be followed. This was the second time I saw him. I examined his chest and found there were catarrhal symptoms. I asked him to wear either flannel or linen to protect his chest from exposure to cold, otherwise he would get asthmatic attacks again. I must say he was not free from his nightly attacks. He was getting them regularly every night, but they were somewhat in a mild form. I changed the prescription to *Ipecac* 3. He was better for some time with it and the hepatic pain and swelling very much subsided. He was under my treatment for a very long time. He used to keep well for some time and get worse at others, but under my treatment he was never so bad as before. I treated him with *Naja trip.*, *Ipecac*, *Arsenicum alb.*, *Antim. tart.*, *Nux Vomica*, *Cuprum met.*, *Lobelia infl.*, *Grindelia rob.*, *Hydrocyanic Acid*, etc., but he derived the best effect from the first two named remedies; in fact they were the only two remedies that used to give immediate relief. So when he was away from Bombay for two or three months he carried these two remedies with him with directions to be taken thus:

Urgent dyspnœa without much cough or expectoration, *Naja trip.* 6; and Asthma with fits of coughing and more or less expectoration, *Ipecac* 3. He soon became well acquainted with the action of these drugs. In this case as well as in others I found *Naja trip.* a good remedy to relieve dyspnœa when other remedies failed. In treating asthmatic patients it should not be lost sight of. He continued to take those remedies wherever he might be, and would write to me for a fresh supply whenever he would fall short of them. It was in June, 1889, he wrote to me for a new supply of *Naja trip.* and *Ipecac.* I sent him *Blatta orientalis* 1x trit., to be taken one grain in repeated doses during an attack, and 3x tincture, one-drop doses, twice or thrice during the interval. I

received a long letter from him after a fortnight, in which he stated that this new medicine had done immense good and that he had been nearly free from all troubles for the last five or six days. He hoped that, if his present state of health were to continue, he would be very thankful to God and to me, and probably all his troubles would be soon at an end, after suffering for such a long period. Really this was the end of his trouble. He soon improved in health and had no trouble. I have heard from a friend of his only the other day that he was doing well.

CASE 3. Mrs. Nundy, a thin lady, aged twenty-three, mother of three children, came from a village for the treatment of Asthma, from which she had been suffering for the last eight years. For the first two or three years she used to get two or three attacks in the year, but gradually they were repeated more frequently, though the character of the attack remained the same throughout. It would last two days and two nights whether any medicine was given to her or not. Nothing would alleviate her suffering during an attack—too much interference would increase her sufferings and prolong the duration of the attack, so, practically speaking, almost nothing was given to her during an attack. The great oppression of breathing, restlessness, profuse perspiration, inability to move or lie down and loud wheezing would be the most prominent symptoms in each attack. These would remain almost with equal violence for nearly forty hours, when the spasms would cease with slight cough and expectoration, and she would be perfectly at ease as ever and there would be no trace of the disease left, except slight wheezing sound on ausculation. But latterly these attacks were very frequent, almost every week or ten days. In August, 1890, she was brought here for treatment. It is worth while to mention that she took both Allopathic and native drugs during the interval of attacks to prevent their recurrence, but without any effect. I saw her first on the morning of the 5th of August, during an attack. I prescribed *Blatta orientalis* 1x trit., one grain every two hours. It was to their surprise that this attack subsided unlike all others by the evening; that is, it disappeared within twenty hours. This encouraged the lady and her husband so much that she wanted to have regular course of treatment under me. I put her under tincture of *Blatta orientalis* 1x, one drop per dose, twice daily. She continued this medicine till the time of the next attack was over; that is, for ten days. After the expiration of this period she began to complain of a sensation of heat all over her body, so I changed it to 3x, one drop morning and evening. She kept well and after a month she went home

thinking she got well. A month after her going home she had an attack of Asthma at night and she took *Blatta orientalis* 1x as before, and by the next morning she got well. This was in October and after two months of the last attack. She had another attack in winter and none since.

CASE 4. A young man, aged thirty-four, had been suffering from Asthma for some years. He was invariably worse during the rains and the winter and a chronic bronchitis was almost a constant accompaniment. He tried Allopathic and lots of patent drugs with only temporary amelioration of the trouble. At last, in November, 1888, he came to my office. On examination of his chest I found there was a chronic bronchitis. He said that slight difficulty of breathing with hacking cough used to trouble him every night, besides a cold would be followed by a severe attack of Asthma, so its periodicity of recurrence was irregular. I treated him with *Ipecac*, *Arsenicum alb*, etc. The first named medicine did him the most good, but he never got entirely well. So in July, 1889, I put him under tincture *Blatta orientalis* 3x, a drop dose, three or four times daily. Under its use he began to improve steadily and had only two or three attacks of asthmatic fits since he used this drug, which were promptly relieved by the same drug in 1x potency. *Euphrasia off.* was prescribed for his cold whenever he had it. He is free from all trouble for the last year and a-half. His general condition is so much changed that there is no apprehension of the recurrence of his former illness.

CASE 5. Baln Bose, an old, corpulent gentleman, aged sixty-two, has been suffering from asthmatic attacks for some years. He never took any Allopathic medicine, bnt had always been under the treatment of native Kabiraj (medical men), under whose treatment he was sometimes better and worse at others. Latterly he became very bad and passed several sleepless nights. He used to pass his days comparatively better, and it was at night and in the morning he used to be worse. On the 24th of July, 1890, at 9 A. M., I saw him first—there was a slight touch of Asthma even then. I made him try to lie down in bed; this he could not do, owing to the coughing fit it excited while in that posture. On examination the chest revealed chronic bronchital catarrh, and there was also a harassing cough, with very little expectoration after repeated exertion. I prescribed *Blatta orientalis* 1x trit., one grain every two hours. He passed the night without an attack, and the next morning when I saw him he complained that only the cough was troublesome last night and no fit of Asthma. The cough was somewhat troublesome

even when I saw him in the morning. I gave him tincture *Blatta ori.* 3x, one drop dose every two hours. He passed the day and night well. He continued the treatment for a fortnight and then went home, where he has been keeping good health, with the exception of occasional bronchial catarrh.

CASE 6. A shoemaker, aged forty-two, robust constitution, has been suffering with Asthma for three or four years. He came to my office on the 6th of November, 1890. He had been getting asthmatic fits almost every night since October last. During the day troublesome cough, with slight expectoration and hurried breathing made him unable to attend his business. Tincture *Blatta orientalis* 1x, one drop doses, six times daily, was given. The very first day he perceived the good effect of the medicine and continued the same for a month, when he got well and discontinued the medicine. He has been keeping well ever since.

CASE 7. Mr. G., aged forty, healthy constitution, had an attack of asthmatic fit on the 4th of August, 1890, preceded by a violent attack of cold, from which he frequently used to suffer. He had this severe cold in the morning and in the afternoon he began to experience a great difficulty of breathing and slight oppression and lightness of the chest—this, by 9 P. M., developed into a regular fit of Asthma. I was sent for. On my arrival, at 10 P.M., I found he was sitting before a pile of pillows with elbows supported on them, and struggling for breath. There was also a great tightness in the chest, occasional cough and inability to speak. I at once put him under *Blatta orientalis* 1x trit., one grain, every fifteen minues, and less frequently afterwards if he felt better. On my visit next morning I found him much better, but he said his trouble at night continued, more or less, till 2 A. M., after which he got some rest. Now, there was a troublesome cough, slight oppression of the chest and great apprehension of a second attack in the night. The same medicine, 3x trit., was given to him during the day, and a few powders of 1x were left with him in case he was to get an attack at night. There was a slight aggravation of those symptoms at night and he had occasion to take only two powders of 1x. The next morning he was every way better, except the cough, for which four powders of 3x were given daily. In four or five days he got entirely well and had no relapse.

CASE 8. Mrs. D., aged twenty, a healthy, stout lady, mother of one child, had been always enjoying good health, was suddenly attacked with a violent fit of Asthma on the 8th of August, 1890. This was the first occasion she had a fit of Asthma, the result of a severe cold. At about 2 A. M., she was suddenly seized with

difficulty of breathing and a great oppression in the chest. She could not lie down any longer in bed and had to sit up, being supported on a pile of pillows. On the morning at 8 A. M., I saw her first. I noticed she was in a great agony and almost speechless. On examination I could not detect much loud wheezing—the characteristic of an asthmatic attack—though the rapid movements of the walls of the chest were even quite visible to the bystanders. The patient was feeling almost choked up and could not express what was going on. She only pointed out to a point, a little over the pit of the stomach most painful. There was no cough—perspiration was pouring over her body. I could not at once make out whether it was a case of pure Asthma, especially as she never had it before. However, I made up my mind to give her *Blatta orientalis* 1x trit., a grain dose every fifteen minutes and watch the effect myself. Three doses of it were given without much change for the better. I left a few more doses to be repeated half hourly and promised to see her again within a couple of hours. On my return, I found her in a much better condition, and she had taken only one of those powders I had left, and they were not repeated, as she felt better. Now I thought it must have been an attack of Asthma, and I continued the medicine unhesitatingly. There was an aggravation at night, but on the next morning she was better, and the usual asthmatic cough began with slight expectoration. There was pain in the chest and head with each coughing fit. *Blatta orientalis* 3x trit., four to six doses, was continued for a few days, when she got well. Again in November she had a slight tendency to an asthmatic fit, took two or three doses of the same medicine and got well. Since then she had not been troubled again.

CASE 9. A gentleman, the keeper of a common shop, aged forty-four, belonging to a village, had been suffering from Asthma for the last eight years and he had always been under treatment of native Kabiraj (medical men). In June, 1890, he came to the city, and I was called to see him on the 14th of June, and to treat him for his Asthma. The day previous he had an attack for which he took no medicine. Each of his attacks usually lasted four or five days. I gave him *Blatta orientalis* 1x trit., one grain, every two hours and left him six such powders to be taken during the day. He took them and felt better the next day. He stayed here two or three days more, and when well he wanted to proceed home, which was some couple of hundred miles. He took with him two two-drachm phials of *Blatta orientalis*, one of 1x and the other of 3x trit. He continued 3x, one grain doses, two or three times daily, for a month and discontinued afterward.

He had no occasion to take 1x; that is, he had no more asthmatic fits. In January last, 1891, I had a letter from him thanking me for his recovery and asking for some of the same medicine for a friend of his, who had been suffering from Asthma. The friend of his who used the same drug, *Blatta orientalis*, was equally benefited.

CASE 10. Mrs. Dalta, a thin lady, aged thirty-eight, mother of several children, had been exposed to cold, which brought on an attack of bronchitis with fever. This, in the course of a fortnight, developed into a regular fit of Asthma. She was all this time treated by an old school physician, but when the husband of the lady saw that she was daily getting worse and a new disease crept in, he made up his mind to change the treatment. I was called to see her in the morning of the 8th of June, 1890. She became very much emaciated, could not take any food, had fever with acute bronchitis, hurried respiration, difficulty of breathing; this she was complaining of bitterly, owing to which she could not lie down in bed, but had to sit up day and night. There was a prolonged fit of spasmodic cough at a short interval, with slight expectoration, but these coughing fits would make her almost breathless. This was the first time I prescribed *Blatta orientalis* 1x in a case of Asthma with fever and acute bronchitis. It answered my purpose well. She had only ten powders during the day and passed a comparatively better night. Next morning when I saw her she was better, except the coughing fits, which were continuing as before. The same medicine was repeated. On the 10th of June she had no asthmatic trouble at night, but there was not much improvement in her cough—*Anti tart.* and *Bryonia* were needed to complete the cure.

D. N. RAY, M. D.

65 Beadon street, Calcutta, India, June 22, 1891.

(Messrs. Boericke & Tafel can supply *Blatta orientalis* in the 3x trit., or dilution. Their stock of the drug was sent them by Dr. Ray.)

A PHASE OF CHOLERA.

The Indian Homœopathic Review is a newcomer on our exchange list, though not a new publication. It is published and edited by P. C. Majumdar, L.M.S., 203 | 1 Cornwallis street, Calcutta, India. The copy before us is No. 1, of Vol. IV. and contains sixteen pages of original matter in English followed by sixteen more in the native tongue, or type, a sealed book to western eyes.

The following extract from the leading editorial will be interesting to physicians in this country. The subject is cholera in Calcutta: "Homœopathy again gains its ascendency on the whole. We have to treat a large number of cases and though we do not presume to say that we are able to cure all cases, still our success is far more encouraging than the old school treatment. The public is the true judge in the matter. In this year we observed in some cases a peculiar condition of the patient which we had not seen before. The attack in the beginning seemed to be rather mild and the usual treatment was on the whole favorable. There was a favorable turn of the case, the gradual and regular reaction took place. The stools became bilestained, natural warmth appeared, pulse regular and steady, urinary secretion free, and, to all intents and purposes, the patient seemed cured. In a few cases we have allowed even barley and conjee and other diet. But the patient is unable to recoup his health. He gradually sinks down, not from any appreciable complaints, but from utter prostration which we could not succeed in averting. We treated with utmost precision both with the help of symptoms and pathology, but I am sorry to say we utterly failed. Some of our friends indulged in meat broths and even brandy and other diffusible stimulants with no effect."

TISSUE REMEDIES IN DISEASES OF CHILDREN.

Dr. William Boericke, of San Francisco, one of the editors to the well-known Boericke and Dewey editions of *Schuessler*, writes as follows (*Cal. Hom.*) concerning one phase of the use of these remedies:

"Especially useful are they in treating diseases in children where, as a rule, objective symptoms alone are our guide, where of necessity we must generalize more frequently than is necessary with our adult patients. Again, the rapid involvement of a tissue throughout its whole extent that is so characteristic of childhood's diseases, hereditary manifestations and developmental disorders, offer enticing opportunities for employing them on general principles and according to general indications. Theoretically this may not be desirable, but, practically and for the time being, it is certainly a valuable aid.

"Among these twelve remedies, the one for the constitutional troubles of childhood is, of course, *Calcar. phosp.* It is especially indicated in the dyspeptic and consequent atrophic conditions

during dentition, and especially when a scrophulous and tuberculous tendency predisposes to glandular disorders. Such chilren have a poor constitution, although, as we all know, they may be fat and heavy, and with large and dimpled limbs, but the bones will be soft and friable and their fibre weak and flabby. Such children have but little power of resistance—they readily succumb to disease, and surgical operations are more hazardous, slight injuries result in serious disorders. Here is the field for *Calc. phos.*, and it will do all that medicine can accomplish. I give it frequently during the teething period in artificially fed children as an occasional addition to the milk. It is my custom to have tablets of the 3x trituration, of which I dissolve three or four in a bottle of the food, and add thereby a very necessary constitutent of the body. If it is remembered how necessary the phosphate of lime is to the developing and growing organism, how, indeed, its presence is essential to the *initiation* of growth, supplying the first basis for the new tissues, promoting cell growth, its importance as a constituent of the food becomes evident. This method of administering *Calc. phos.* is of special benefit in weak, scrophulous subjects, where digestive difficulties and bowel irritability result in mal-nutrition. In older children, after acute diseases, administered in the same way, it proves to be a real tonic. I think there is an increased activity to be obtained at times by giving a constitutional remedy like this *with* the food—it is then that the organism is peculiarly receptive, its whole absorbent and glandular system intensely active, and therefore offering the best conditions for appropriating the remedy. The symptomatic indications are so well known that I need not repeat them here.

"Later in life we find *Calc. phos.* an excellent remedy at the time of puberty; girls who are anæmic and have much headache, especially on top of the head, are much troubled with acne and flatulent dyspepsia, the distress in stomach temporarily relieved by eating.

"The intestinal symptoms have often been verified. The diarrhœa calling for *Calc. phos.* occurs most frequently during the teething period; the stools are hot, undigested, sputtering, offensive; the child shows a craving for indigestible things, ham, smoked meat, &c.; the region around the navel seems very sore. This condition may develop into a hydro-cephaloid, for which state *Calc. phos.* becomes an admirable nutrition remedy.

"*Ferrum phos.*—This is in some respects the most important of these remedies. I wish to emphasize its remarkable power in all respiratory affections of children. I do not think it well to

give it too low, it seems to act best when not given lower than the sixth potency. If after a cold, we have a dry cough, congestion to the chest, oppressed, hurried breathing and there is a possibility of development of pneumonia or bronchitis, the timely administration of this remedy will do all that drugs can do. It generally cures the case alone, though at times *Bryonia* follows well, indeed the two remedies seem to be complementary—*Bryonia* extending apparently the curative range of *Ferrum phos.* I have had some satisfactory results of the use of *Ferrum phos.* in nose-bleed of growing children, here again, working harmoniously with *Bryonia*. Others report its successful employment in eneuresis, but personally I have no experience with it in this trying affection.

"*Kali mur.*—The adaptation of this remedy to many catarrhal processes in the later stages is one of the certainties in medicine. My experience with it in chronic catarrhal conditions of the middle ear and throat, eustachian swelling, with deafness, although limited, yet fully confirms that of our specialists and general practitioners. In ulcerated sore throat, diphtheria and tonsilitis it has gained its greatest laurels.

"*Kali phos.*—One undoubted case of somnambulism was readily and permanently cured by a few doses of the sixth trituration of this remedy. It deserves trial in night terrors of children as well as in morbid fears and over-sensitiveness and in the whining, fretfulness and sleeplessness of nervous children.

"*Kali sulph.*—In the later stages of catarrhal cough, when there is much loose phlegm, great rattling of mucus in chest, this remedy is to be remembered with *Antim. tart.*, *Ipecac*, etc. Its symptoms are apt to be worse in the heated room.

"*Natrum sulph.* is unquestionably a valuable remedy in asthma in children. I have entirely cured by means of this remedy several cases that had always had an attack from any change of weather or gastric disturbance. Almost invariably I found a history of eczema (tinea capitis) in these cases, which would guide to some other of the anti-psoric remedies when the action of this seemed to be exhausted."

Cocus Cacti. Cough. Worse when waking at 6 A. M.; *clear*, dry and barking; slight expectoration of thick, viscid mucus. Worse an hour after dinner, 3 P. M.; so violent as to cause vomiting and *expectoration of a great quantity of thick, viscous, and albuminous mucus.* LIPPE.

ON THE MEDICINAL USES OF THE BEE STING POISON.

By W. T. Fernie, M. D.

Paper read before British Homœopathic Society June 4, 1891.

On the occasion of our last meeting here, Dr. Galley Blackley made a playful reference to me as having awoke, after a three years' slumber, to some sense of my responsibility towards this society. I ask your permission to explain that it is a privilege of the old to sleep, and that feeling myself considerably superannuated among so many younger men in the plentitude of their modern learning, I have sat as a disciple rather than as one of the *Patres Conscripti* at our monthly assemblies since I had the honor of becoming enrolled amongst you three years ago.

Now in venturing to offer a paper, I beg you, *solvere senescentem*, to make allowance for such lack of knowledge as I may display concerning the advanced tenets of recent physiology, whilst holding me excused for employing the language of a past pathology rather than the compound classical nomenclature of to-day's *fin de siècle* attainment.

Pleading thus, I will take as my text a case which I attended as long ago as in 1858, and which first brought to my knowledge the potential uses of the bee-sting poison as a curative agent in disease. At that time I was an orthodox country practitioner in Hampshire, and the patient to whom I allude came under my care as an old pensioner, who eked out his daily pittance by working as an agricultural laborer on the Squire's estate. He was about sixty years old, and of rheumatic tendencies, living in a damp locality on the edge of the New Forest.

His symptoms in brief—as far as I remember them—were those of endocarditis, becoming subacute, with a systolic murmur, and with embarrassed action of the heart through dilatation, but without any marked hypertrophy. The kidneys were not implicated as shown by any albuminuria, and the old soldier was a temperate man, except for getting now and then bemused in beer at the village tavern on a Saturday night, like many of his class. Nevertheless, I well remember his urine at the time was scanty and high colored, with copious lithic deposits.

All the symptoms I have recited gradually increased, together with growing dyspnœa, and with general anasarca, which became more and more urgent, until at length the man took altogether to his bed, and seemed doomed to sleep quickly in God's acre with his rustic forefathers.

He was treated with alkalies, hydragogue cathartics, and

diuretics, *Secundum artem*, being also seen and prescribed for by one and another of my friendly *confrères* from the adjoining county hospital, where I had been lately the house surgeon.

However, the poor fellow went from bad to worse, and became at last so completely waterlogged as to lie an enormous mass of shapeless humanity, semi-comatose, and "babbling of green fields," in a small attic at the top of the narrow, steep, cottage stairs, down which how he might be presently brought on the way to his long home seemed a problem difficult of solution.

It happened finally that, on my visiting him in this dire extremity, I found his womenfolk in the garden, making a brew from refuse honeycomb just after taking their bees, and I was asked if some of the reeking beverage might be given to the sick man in case he could drink it.

Readily assenting to the use of this, or any other proposed *Solatium*, under such desperate conditions, I left with the full assurance I had seen the last of my patient in the land of the living.

About a week afterwards, having to ride past the cottage, which was in a remote part of my district, and wondering that I had not been applied to as Registrar of deaths to record his decease (for, like George Coleman's "two single gentlemen rolled into one." I was then unitedly the Poor Law Medical Officer and the Government Charon), I dismounted, not doubting that I should find the defunct pensioner still waiting interment, which had been delayed, through some casual hindrance in providing the necessary *obolus*, or in convening the distant relatives; but to my intense surprise, on entering the downstairs dwelling room, I beheld the man comfortably discussing some broth, sitting there, restored to his ordinary proportions, "clothed, and in his right mind."

It had happened that shortly after beginning to drink the bee beer, which he took with avidity, profuse watery discharges commenced from the intestinal and renal outlets, which continued until all the dropsical swelling had disappeared, the dyspnœa had become relieved, and the heart ceased to give him distress, or to remain sensibly disturbed. In short, I had no alternative but to believe that either the strange brew, or some wonderful natural crisis occurring just at the time by a singular coincidence, had brought back my patient from the open portals of the grave.

Finding the unlooked-for improvement to continue, and casting about in my mind for an explanation of its cause, I chanced to describe the case and its present issue to my friend Dr. John Wilde, now of Weston-super-Mare, but who then, having the

courage of his opinions, avowedly practiced Homœopathy as a Poor Law Doctor in a district immediately adjoining mine. He at once recognized the fact that some bee sting virus contained in the beer, as got from dead bees and brood comb boiled up in the brew, had acted specifically on the cardian serous membranes, as well as on the mucous excretory linings of the sufferer, and had operated Homœopathically for his prompt and happy rescue. Dr. Wilde further sent me a pamphlet which had then been recently published, on *Apis Mellifica; or, the Poison of the Honey Bee considered as a Therapeutic Agent*, by C. W. Wolff, M.D., of Berlin, which little book I read with deep interest, gaining new light from its pages, and explicit instruction about the provings and well ascertained effects of the remedy in question.

Incidentally I may add that the patient whose case I have been describing went on uninterruptedly to complete convalescence, and was able after a while to resume his work in the fields. He retained his health for the five or six more years of my sojourn near him; and eventually he died, I believe of old age, uncomplicated by any renewed trouble of the heart or any return of dropsy.

From the small treatise of Dr. Wolff I learnt that his practical experience, based on the provings of Dr. Hering, and attesting the faith of his own grateful heart with respect to the bee sting poison, showed the medicine to be eminently curative for œdematous swellings in general, for the higher grades of ophthalmia, for inflamed states of the tongue, mouth and throat; also by its specific power over the whole internal mucous membranes and its appendages.

Dr. Wolff had likewise employed *Apis* very successfully for curing furuncles, uticaria and erysipelas, as well as for the typhoid fever, which he emphatically persuaded becomes engendered by the process of vaccination. Moreover, he had convinced himself that *Apis* is the most sovereign remedy for intermittent fever, annihilating the disease so radically that no relapses ever take place and no secondary symptoms are ever developed.

For measles, scarlet fever, panaritia, spontaneous limping, white swelling of the knee and dysentery, Dr. Wolff had further found *Apis* to be an invaluable and most trustworthy weapon of defence; whilst he abundantly verified the necessity which others had recorded for caution in giving this medicine to pregnant women, though conversely he knew of no drug endowed with such reliable virtues for preventing miscarriage, particularly during the first half of gestation.

His doses ranged from a pellet of *Apis* 30 to a drop of tincture of the third strength, repeated at intervals or sub-divided. Taken altogether, he had come to regard *Apis* as the greatest polychrest medicine, next to *Aconite*, which Homœopathic pharmacy can furnish.—*Monthly Homœopathic Review.*

THUJA.

By Dr. George Herring.

Thuja has been used in a variety of disorders, but has obtained its principal reputation in the treatment of venereal diseases, both primary and secondary, and should never be lost sight of. In warts, simple and venereal, and in polypi, it is always a promising remedy. I cannot speak so well of it in nævi, having twice failed to get any good effect from its use.

But I wish just now to speak of its employment in the irritable bladder of gouty and eczematous patients, and if I may judge of its virtues by the effect it had in one case which I treated, then I should say there is no medicine equal to it in such cases. An old gentleman, æt. 87, whom I had often treated for eczema and irritability of the bladder, at last got so weak from his rest being so much disturbed by rising in the night to relieve his bladder, that I began to think that he would soon depart this life from utter exhaustion. *Bell.*, *Nux Vom.*, and *Acid Phos.* had done some good, but evidently not enough; and it was desirable to try something else. I therefore gave *Thuja*. The effect far exceeded my anticipation, for the old gentleman has improved wonderfully, and now he rises soon after seven in the morning fresh and hearty after a good night's rest. He does not take a dose more than once or twice a week now. I gave the 1x dilution in two-drop doses.—*Hom. World.*

EXTERNAL USES OF HYDRASTIS CANADENSIS.

By Brojendra Nath Banerjee, L. M. S.

External applications of medicines sometimes are valuable adjuncts to the treatment of many diseases. Some time ago I published the virtues of Calendula as an external medicine in the pages of the Calcutta *Journal of Medicine*. I have found in my

practice that external application of medicines is sometimes a necessity to bring about a *rapid* cure. Like Calendula, Hydrastis is a very valuable external remedy. Hydrastis was an eclectic American medicine and a reputed application to sore eyes and legs. Two alkaloids have been extracted from it—one is known as Hydrastin and the other Hydrastia. I have used Hydrastis externally with great success in leucorrhœa, gonorrhœa, gleet, chancre, phimosis, conjunctivitis, otorrhœa, ozaena, lupus exedens, piles, leucoderma, eczema, chapped hands, porrigo, aphthous sore, sloughing ulcers, sore and fissured nipples, cracked lips, hands and feet, prurigo of prepuce, vagina and scrotum, general itching of the body without any visible eruptions, pityriasis versicolor, etc.

I use Hydrastis externally, either in the form of a lotion, oil or glycerole. The strength of lotions varies from five drops to one dram per ounce, and that of oil and glycerole from half a dram to one dram, scented with a few drops of oil of Bergamot.

1. *Leucorrhœa, either Vaginal or Uterine.*—In case of Uterine leucorrhœa injection of Hydrastis lotion, one dram to half a pint of tepid water, should be slowly injected by Higinson's syringe. In these cases it is essential that the lotion should remain in the Uterine cavity for a few minutes. In order to gain this object raise the buttock considerably with the help of a pillow and then use the injection. Much benefit is derived, if, after injection, a cotton tampoon well saturated with Hydrastis of glycerine (one dram to one ounce), be introduced into the Uterine cavity and allowed to remain there. In Vaginal form of this disease the injection should be used as above described as well as the tampon.

2. *Gonorrhœa and Gleet.*—Infusion of Hydrastis or solution of Muriate of Hydrastis is preferable to the tincture. Ruddock advises to use Glycerine of Hydrastis or Fellow's Hydrastis one dram, Glycerine three drams, and distilled water half an ounce, but I have found in my practice that patients cannot bear this strong solution. From the above formula I curtail the quantity of Tincture Hydrastis to twenty drops, and this has answered very well both in Gleet and Gonorrhœa.

3. *Chancres*—Hydrastis lotion, one dram to one ounce of water, is a very neat and efficacious application. I have succeeded in curing even sloughing phagadenic chancres with the help of this lotion. The chancre should be kept constantly wet with this lotion.

4. *Phimosis*—The same lotion as above, used in the same manner. About a week's application is necessary.

5. *Conjunctivitis*—The strength of the lotion should be five

drops to one ounce of water, and to be dropped inside the eye thrice daily. A pad wet with the same lotion should also be applied externally. Hydrastis drops succeed better, when Nitrate of Silver either irritates or fails. It is also a capital lotion for Gonorrhœal opthalmia.

6. *Otorrhœa*—Glycerole or oil of Hydrastis (a dram to an ounce). This is to be dropped into the ear. If there be pus, work with tepid Hydrastis lotion (ten drops to an ounce of water) and then drop the lotion.

7. *Lupus Exedens*—Hydrastis oil and sometimes strong tinctures are applied, but I have found oil succeeds better.

8. *Piles*—Hydrastis lotion is a very efficacious application as a hæmostatic and painskiller. It is better than the Hazaline.

9. *Leucoderma*—I have cured half a dozen cases of this incurable disease. All of these cases were mild ones, but three of them were of long standing. In all the cases glycerine of Hydrastis was used.

10. *Eczema*—Wash with a weak lotion and then apply oil of Hydrastis. Glycerine in many cases irritates the sores.

11. *Chapped hands*—Glycerine and oil of Hydrastis are equally efficacious. I believe no other known application can surpass Hydrastis in removing this very troublesome complaint.

12. *Porrigo*—The same application as in Eczema.

13. *Aphthous Sore*—Glycerine of Hydrastis application to be constantly renewed.

14. *Sloughing Ulcers*—As in Chancre.

15. *Sore and Fissured Nipples*—Glycerine, oil or strong tincture of Hydrastis.

16. *Cracked Lips, Hands and Feet*—The same as in chapped hands. Effect speedy and certain.

17. *Prurigo of Prepuce, Vagina and Scrotum*—Oil of Hydrastis gently rubbed for a quarter of an hour and twice or thrice in twenty-four hours.

18. *General itching of the body*—Hydrastis oil well rubbed daily for three or four days before bathing.

19. *Pityriasis Versicolor*—Oil or glycerine of Hydrastis greatly rubbed for half an hour or twice daily.

20. *Black spot in the face known in this Country* as————Hydrastis oil or glycerine—I have seldom seen such an efficacious application to remove these spots which generally disfigure very beautiful and sweet faces of gentle sex.

21. Lastly, Hydrastis can well compete with Carbolic, Phenyle and other antiseptics. In fact it is not only a very efficacious antiseptic, but acts as an excellent deodoriser.—*Indian Homœopathic Review.*

AN ACCIDENTAL PROVING OF CALENDULA.

By John H. Clarke, M. D.

The prover in this case was a new-born infant, a girl, the second child of Mrs. ——. After her previous confinement the mother had at one period suffered from sore nipples, and had found *Calendula* of such service that she determined to be beforehand this time, and on her own account bathed her nipples with *Calendula* from the beginning, to prevent them from getting sore. Before letting the baby nurse the nipples were washed with water, and all the *Calendula* removed, as she belived. That the washing was not perfectly successful the sequel will show.

The baby was perfectly healthy when born, except for a slight "cold," which did not give any trouble. Nine days after birth the infant was noticed to be constipated, and to suffer from wind. On the following day there was a decided yellow tint of the skin, so much so, that I concluded I had to deal with a case of icterus neonatorum. At the same time the water was dark and offensive, and the stool yellow. The color of the stool attracted the mother's attention, and she asked if it could possibly be the *Calendula* that was the cause of baby's illness, for, she said, "the motions are *exactly the color of marigold flowers*"—and she was botanist enough to know that *Calendula* was the botanical name for marigold. She then informed me how she had been using the *Calendula* lotion. There was no mistake about the color of the motions, and though I was not prepared to give a decided answer, I stopped the use of the lotion. On consulting authorities I found the *Calendula* symptoms so clearly manifested in my little patient that I no longer doubted the source of her illness.

With this by way of preface I will now give the daily record of symptoms.

Ninth day of life and of the proving. Constipation and wind.

Eleventh day. Screaming. Hands and arms twitch. Pain after nursing. Skin yellow. Stool deep yellow. Urine dark, offensive. (*Lycopod.* given.) Bowels moved in evening. Stool curdled, expelled forcibly.

Twelfth day. Slept till 4 A. M. No screaming. Restless 4 to 5 A. M. Urine offensive, dark, staining diapers. At 11 A. M., immediately after nursing, was convulsed, eyes fixed during the convulsion; rolled them about afterwards; dark round mouth; vomited milk with slime. Strains, but passes no stool. Extremely nervous. Starts at noises. Fretful. Hungry after nursing. Red-gum. (*Æthusa* given.) Was much better by 6:30 P. M. Not sick again. Slept well.

Thirteenth day. Face clearer. Only a little sick once. One brownish, reddish, yellow stool. No screaming, little crying. (Continue *Æthusa*.)

[It was the appearance of the stool on this day that drew attention to the possibility of *Calendula* being the cause of the illness, and from this day its use was discontinued.]

Vomited once, 5 P. M., after nursing, curdled milk with sticky mucus.

Fourteenth day. Bowels not moved again. Less wind. Urine clearer, no offensive odor, or stain. Hiccough. Jaundiced tint of skin varies sometimes deeper, sometimes less. (*Nux Vom.* given.)

Fifteenth day. Much better, slept well. Two motions color of marigold. Much straining. Violent hiccough after nursing or vomiting. Vomited milk and thick mucus. 5 P. M., makes a grunting noise, as if passing stool, but only wind passes. (*China* given.)

Sixteenth day. General improvement. Brighter. Less sensitive to noises, less yellow. One stool in night; less deep yellow, less odor, frothy. Less hiccough. Passing wind downwards. No vomiting. Always wants breast. (*Sulph.* given.)

Seventeenth day. 6 P. M. and 8 A. M. Marigold colored stool, frothy, a little brown mucus. Straining. Wakes up screaming. In pain all night. Much wind up and down. Does not lose flesh. Less yellow. (*Puls.* given.)

Eighteenth day. Had diarrhœa in night, large, frothy, yellow stools, excoriating. Much wind. No sickness. Hiccough less, no vomiting. (Continued *Puls.*)

Twentieth day. Stools still the same, very dark yellow, less frothy. Cried much before stool. Pale, black rings round eyes. Hiccough still.

Twenty-first day. Vomited milk, sour; shuddered after it, as if the taste was unpleasant; less twitching; strains much.

Twenty-second day. Gasps in sleep; keeps the mouth open, moving head up and down (backwards and forwards); breathes rapidly at times; yellow color comes and goes; starts in sleep, but no longer starts at noises; a little discharge from left eye. (*Chel.* given.)

Twenty-third day. Was better after second dose of *Chel.* Has not rolled eyes; has kept mouth closed; slept well; less hiccough; stool still dark, but less chopped looking.

Chel. was continued. A cold in the head, with thick, green discharge, developed, relieved by *Nux.* and *Merc.* The other symptoms subsided. She became less ravenous, and was satis-

fied with her food. *Sanguinaria* proved useful in this connection. In the left eye there appeared a thickening of the conjunctiva like a redundant fold on the thirty-first day, which did not entirely disappear until two months afterwards. The peculiar stools continued for some weeks. The urine varied in character, but as late as fifty days from birth it was strong-smelling and stained deeply. At this time she screamed much, and an umbilical hernia developed. (*Senna* seemed to finally put the water right.)

The provings of *Calendula* are scanty, but I think the recorded symptoms are definite enough to enable us to identify the action of the drug in the above case. The chief characteristics are the nervous irritability of the child, with the extraordinary sensitiveness to noises. Any sudden noise would make her start excessively. Again, the *shuddering* and *vomiting* have been before shown in *Calendula* provings, and Hering mentions "jaundice" as having been caused by it. In the light of Dr. Cooper's recent experience with the drug I think this observation worthy of being put on record.

I will now give the symptoms of the case in *schema* form, leaving it to future observations to decide the value of the symptoms:

MIND:

Extremely nervous; starts at sudden noises (from early in provings till near the close).

Fretful. (*Cham.* relieved.)

HEAD:

Moves head up and down (see RESP.).

EYES:

Rolls eyes.

Fixed (in convulsion).

Dark rings round eyes.

Discharge from l. eye (22d day).

An appearance as of skin over inner section of l. eye (30th day, not disappearing entirely till some weeks after).

EARS:

Hearing acute; starts at noises.

NOSE:

Cold in head, with thick, green discharge (26th day), relieved by *Nux* and *Merc.*

MOUTH:

Dark circle round mouth in convulsion.

APPETITE:

Hunger immediately after nursing; constantly wants breast.

STOMACH:

Hiccough, violent, persistent (lasted many days), < after nursing, and after vomiting.
Pain after nursing.
Vomiting milk, curdled, slimy. Thick, sticky mucus.

ABDOMEN:

Umbilical hernia (50th day), after much straining at stool and screaming.

BOWELS:

Constipation and flatulence.
Makes a grunting noise as if passing stool, but only passes wind.
Stool deep reddish-yellow—marigold color; chopped appearance; at times frothy; strong odor.
Much straining. Stool expelled forcibly, to a distance if diaper not on.
Anus excoriated by stool.

URINE:

Dark, offensive, staining diaper deeply. (This continued off and on throughout proving, and recurred as late as 50th day.)

RESPIRATORY SYSTEM:

Gasping in sleep; keeps the mouth open, moving the head up and down (forwards and backwards). Breathes rapidly at times (22d day).

EXTREMITIES:

Draws up the legs.
Arms and hands twitch.

SKIN:

Decided yellow. Jaundice.
(Red gum.)

FEVER:

Shuddered after vomiting (as if taste unpleasant—25th day).

SLEEP:

Restless. Restless 4 to 5 A. M.
Starts in sleep.
Gasping in sleep.
Wakes up screaming.

NERVES:

Screams.
Hands and arms twitch.

Convulsion 11 A. M. (12th day), immediately after nursing.
Eyes fixed. Dark round mouth.
Draws up legs.
Extremely nervous; starts at noises.

TISSUES:

Jaundice.
Does not lose flesh, in spite of vomiting.

GENERALITIES:

Symptoms intermittent.

TIME:

4 and 5 A. M., restless.
11 A. M., convulsion.
5 P. M., vomiting (two days).
Evening and night stools, restlessness.

RELATIONS:

The most powerful antidote to *Calendula*, as far as this case teaches, is *Chelidonium*. The congener of *Chelidonium*, *Sanguinaria*, helped on the catarrhal state. *Œthusa* controlled the vomiting, *Chamomilla* the fretfulness. *Lycopod.* was of some assistance; and probably *Rheum.* would also prove antidotal.—*Homœopathic World.*

FROM a copy of *The Keystone* we clip the following summary of the results of treatment during the past year at the Buffalo Homœopathic Hospital:

Of deaths occurring during the year 10 were from acute diseases, 6 were from chronic diseases, 11 were known to be incurable when admitted, and 8 cases died within 48 hours. Six were in moribund condition when brought to the hospital.

Of deaths from acute diseases, three cases, one typhoid, one pneumonia and one dysentery, lay sick with little or no attention, for from two to three weeks, before being brought to hospital, dying from exhaustion the third day after admission.

Those cases known to be incurable when admitted were as follows: Aortic and mitral insufficiency, 1; Bright's disease, 1; Cirrhosis of liver, 1; Phthisis pulmonalis, 3; Senility, 1; Spinal apoplexy, 1; Carcinoma stomach, 1; Tuberculosis lower spine, 1; Wounds incised of lung, 1.

Death rate, .08 per cent. *Less* moribund cases and those known to be incurable when admitted, $.03\frac{89}{100}$ per cent.

GINSENG.

The Chinese call Ginseng Orkota, that is, the first of all plants, and consider it the most costly produce of the earth, diamonds excepted, and ascribe to it the most wonderful healing properties. The prices named by the missionaries for the root have been almost fabulous, a single root being valued in Manchuria at from £250 to £300. Along the river it sells for £30 per Russian pound, but in a bad year Chinese count it as valuable as gold, and give as high as £40 per pound. In China no chemist shop is complete without it. They say that it is a specific in all bodily ailments, to cure consumption when half the lungs are gone, and to restore to dotards the fire of youth.

The wild ginseng of Siberia is said to be the best, and a great deal of it is collected by the Goldi natives, who go out by hundreds from May to September to seek the valuable plant. The natives along the Ussuri river use it boiled for headaches, colds, fevers and stomach aches. In this county, where the *Panax quinquefolium* is indigenious, it is often used in domestic practice as an anodyne for after-pains. Some time ago I confined a large and fleshy woman, who was the mother of several children, and who had always suffered more or less from after-pains, generally to that degree as to require medical aid. On this occasion I left her a few doses of *Morphine* and powdered gum *Camphor*, to be taken if necessary. Two days after her confinement the husband came to see me concerning her after-pains, which had not been relieved by the powders. As I was absent at the time, he went home without any medicine, and found there an old woman who had administered ginseng tea, which had given relief.—T. G. Stephens in *Medical Summary*.

The *Encyclopædia* and Allen's *Hand-book* have quite extensive provings of *Ginseng*.

A PASSIFLORA CASE.

Dr. D. F. Bickford, of Atlanta, Ga., describes a case he was called upon to treat as follows, in *Georgia Eclectic Medical Journal:*

"On January 2, about 10 A. M., I was called to see the child of Mr. A. On my arrival I found patient very nervous, temperature, 101.5; pulse, 140; respiration, 45; bowels discharging every few minutes; discharges watery and very foul. It was also vomiting every few minutes, and any fluid entering the stomach was immediately rejected. The history of the case was this: The

child had been taken sick four days before, and although the mother administered all known domestic remedies, it gradually grew worse. I at once diagnosed cholera infantum, and prescribed accordingly, and in harmony with indications, and left. Called next day at 9 A. M.; found patient somewhat better; had rested reasonably well during the night, and had nursed some during the morning; directed old treatment to be continued and retired. At 2:30 that afternoon was called hastily; child worse and parents very much alarmed. On arriving at the bedside found patient very much excited, tossing from side to side, almost in spasms. On examining the patient closely found stomach contracted into a hard lump, which would relax for a few moments only to contract again more severely."

He administered "anti-spasmodics" of all sorts, but the case grew more desperate. When at his wits' ends he remembered hearing of *Passiflora;* went out and borrowed some from a brother doctor and gave it to the child, who gradually grew quiet, went to sleep and made good recovery. In connection with the *Passiflora* he gave *Bismuth*, giving the latter first, which was immediately vomited up. A teaspoonful of *Passiflora* quieted the child and enabled it to retain the next dose of *Bismuth*, after which *Passiflora* was given alone.

In this connection the following extract from a letter from the Rev. C. T. Bland, of Marion, N. C., may be of interest:

"I value THE RECORDER very highly, and will say that finding the use of the *Passiflora Inc.*, by reading it, is worth more than the year's subscription. I have used it in several cases of insomnia—adults, five drop doses; infants, one drop—and so far it has not failed. I induced a physician (Allopath) to try it for nervousness, and this is what he says: 'I've tried it on self and others with good results. It certainly acts nicely in nervousness.'"

THE THERAPEUTIC VALUE OF CACTUS GRANDIFLORUS.

I have used *Cactus* since 1874. Heretofore I have used it principally in chronic diseases, but during the past two years have used it in continued fevers where the pulse was especially rapid and weak. The effect of the remedy in these cases has been very satisfactory, the pulse almost invariable becoming slower and the heart gaining in power. I am now treating two

cases of cardiac dilation, with *Anasarca* and *Œdema* of the lower extremities, in one of which there is valvular disease with dyspnœa, and in both of which the swelling of the feet and legs was enormous. Digitalis, diuretics, and cathartics had no permanent good effects. I gave each case tincture of *Apocynum* alone, with but temporary benefit. I then gave each of them *Cactus* and *Apocynum*, five drops of each t. i. d., since which time improvement has been rapid and steady. They have now been using these two remedies two months, and the swelling has almost entirely disappeared, while in the one case the dyspnœa is very much relieved, so much so that the patient can lie down in bed to sleep instead of sitting up as formerly. These patients are seventy and sixty-four years old respectively. I have found *Cactus* an admirable remedy in many cases of cold extremities, depending wholly or partially upon a debilitated condition of the system, following upon sexual excesses of many years' duration. In some cases of weakened or failing memory, depending on nervous debility, *Cactus* has been of much value.

Since publishing my letter on "*Cactus*" in the *Medical News* some two of more years ago, I have had many communications from physicians all over the country, some commending, others condemning it. Those who saw no good effects from its use I invariably found had used some unreliable preparation. I use a tincture made from the recent plant, in the proportion of four ounces to the pint of *Alcohol*. Any one who expects good results from inferior preparations will be disappointed.—*C. L. Gregory, M. D., in Therap. Gazette.*

INTESTINAL WORMS.

Often the physician is met with the question: "Doctor, don't you think my child is wormy?" And many times the answer should be in the affirmative when it is not. Worms in the intestines or the stomach will perpetuate a simple fever, diarrhœa or dysentery from day to day, when it might have been relieved at once by some anthelmintic, which is often given by the mother or some neighboring lady, to the great discomfort of the doctor. The indication of worms has not always been clear to me, and doubtless every physician has had a similar experience. I am confident now, however, that their presence may be certainly known. They are indicated by a small, contracted pallid tongue, with *purplish red spots* [not papillas], which grow thicker towards

the end. It is common for the abdomen to become bloated, lips and eyelids swollen, especially of mornings. But wherever the above described tongue is, the *ascaris lumbrocoidis* are present, no matter what else may be the matter. This tongue is frequently met with in chronic diarrhœa and dysenteric discharges of children.—*F. M. Baker, M. D., in Georgia Eclectic Journal.*

SOLANUM CAROLINENSE.

Dr. Abram Smead, of Sandy Ford, Va., writes to the editor of *Notes on New Remedies* as follows: "I saw in the *Virginia Medical Monthly*, September, 1889, that Dr. G. L. Napier, of Blenheim, S. C., had used a tincture of the *Horse-nettle* with great success in epilepsy. I wrote to Dr. Napier to know what part of the plant he used, and how much to the pint of the menstrum. He replied that he filled a bottle half full of the ripe berries, bruised, and filled it up with 60 per cent. *Alcohol*, and gave a teaspoonful four times a day. He also stated in the same letter that he prescribed it for a gentleman who had been epileptic for eight years; the gentleman, misunderstanding the dose, took a tablespoonful four times a day. After taking it for a week he returned to the doctor and told him that he could not take the remedy any longer, as it kept him drunk all time. He has not had a fit since he took the remedy. Dr. Napier also wrote that each dose should produce a feeling of drowsiness, and in obstinate cases he gave it every three hours until there were symptoms of vertigo. He also stated that it controlled puerperal convulsions."

ON HEMORRHOIDS.

By Dr. Mackechnie.

A paper read at the Bath before the Western Thereapeutic Society.

Mr. President and Gentlemen: When asked by our indefatigable Secretary to read a paper, and what its subject would be, I chose that of Hemorrhoids, not that I expected to bring any special acumen to the subject, or that I could expect to teach you anything new in the pathology or therapeutics of piles, but that it is a convenient peg on which to hang a discussion; that so little seems to be said about it in modern days by physicians, who seem inclined to leave the matter wholly to one remedy, *Ferrum*, whether *frigidum* or *calidum*, or both, and that I am desirous to

enter my feeble protest against this indiscriminate use of the knife in such cases, especially as I am afraid that amongst our own colleagues there is too great a tendency to relegate the treatment of piles to the surgeon. Of course, in this, as in many other matters, we are not masters of the field, and are subject to many influences, direct and indirect, but particularly to that of our colleagues of the old school, who, in their agnosticism as to the value of drugs, have nothing to fall back upon in the treatment of piles, but the relief to be obtained in the removal of the damaged part.

We, too, on our part, are many of us wanting in that faith in drug influence, which should enable us firmly to withstand the entreaties of patient and friend, by promising that time and perseverance will do what is wanted without mutilation. We are also influenced by the influx into our number of many new and younger practitioners, and glad we are to welcome them; but they are new from the schools, necessarily more or less under school influence, with some tincture of the aforesaid agnosticism, and knowing the value of similars but imperfectly, while they are able in the use of the knife, and in the ardour of youth lean strongly to the faith in things seen and tangible.

Hence, patients coming to us under the influence of this distressing malady of piles, requiring, as it sometimes does, prolonged and patient treatment of various kinds, are often unable, or unwilling, to give the time, trouble and patience needful to work out a real cure, and desire, especially now that anesthetics and antiseptics are to the fore, the speedy riddance of their painful and disgusting encumbrances.

Now, I am desirous of saying a few words in the hope of staying the tide which is carrying us towards surgery rather than Homœopathy in this connection, and I think we should keep constantly before us the fact that we are advocates of the principle of similars; that every case which is operated on under our care is more or less a slur on that principle, which, notwithstanding, *is* capable in almost every case of effecting a cure. Of course, a great difficulty in bad cases is the need for time and careful nursing. Every case must, of course, be decided on its own merits; one cannot make any absolute rule, but it is for us to keep before the patient and his friends the fact that drug influence, with time and perseverance, *can* cure.

Our method of treating a case of piles must be largely modified by the conditions which brought about the attack, and the extent of the mischief done. It is scarcely needful for me to say anything here about the influence of occupation in the matter.

Whenever a case of piles comes under our care, we may be pretty sure that stasis and distension have been going on for long before we were applied to, and indeed for long before the patient became conscious of any embarrassment, so that even now when seeking our aid he has been first trying some treatment of his own, or of his neighbors, and putting off the application to his doctor as long as might be, but that now, some error of diet or drink, some chill adding to the embarrassment of the circulation, or a purge which, while softening the stool and stirring up the muscular coat to action, has brought about additional congestion of the hemorrhoidal plexuses; and, while swelling yet further the superior plexus, has irritated the sphincter and hindered the lower plexus from returning its contents to the superior; has rendered the mucous membrane irritable and congested, the arteries dilated and congested—so that, taking the whole local pathological condition in view, one need scarcely wonder at the distress and suffering witnessed in a case of inflamed piles, and one's first thought should be how to give relief, to free the occluded veins. Though it may seem most scientific to try and relieve at the hither end, yet so much is to be done at the *locus in quo* by heat and moisture combined, that I think it well to begin with these agents, either by hot hipbath, or by steaming, or by fomentation; any of them well applied. I am myself very fond of steaming, but either will help very much to give relief and enable the patient generally to return the obtruded swelling through the sphincter. There are two points in this connection I am surprised constantly to find medical men so negligent in instructing their patients about. First, as to the method of getting the hemorrhoidal tumor returned within the sphincter, by bearing down as if in defecation at the same time that pressure is made gently and equally on the mass to get it into the rectum; at the same time some grease should be applied to lubricate it. Once get the tumours within the sphincter, the strangulation is over for the time, there is a certain sense of relief afforded, and the patient begins to feel that something is being done.

In cases of fluent piles, pressure may better be made with a warm moist sponge.

It may then be well to consider the need or anvisability of relieving the bowels, and to find out if the rectum is loaded with hardened feces or not. In many cases it *is* worth while, and when needful I have a great liking for the Pulv. Glycirrhizæ Co. (prussian preparation), which I consider better than *Enemata*, although it takes twelve hours before it acts; but the means employed should depend rather on the habits of the patient, on

his fears, his prejudices—before all, on the state of the fecal masses themselves, so far as that can be made out. If an *Enema* is used, I prefer thin warm gruel, with a plentiful admixture of *Olive oil.*

Having emptied the rectum, comes the consideration of the the real drug treatment of the case, and I think one should at once administer *Aconite* or *Belladonna*, or perhaps give them alternately, being guided very much in this matter by the indications given by the thermometer, general febrile condition being the predominant indication for *Aconite*, and local active congestion, or inflammation, for *Belladonna.* In children with inflamed piles I always take *Chamomilla* well into consideration.

The dietary, of course, should be very carefully managed, generally should be but slightly azotized, not fatty nor alcoholized, leaving the patient but little else than farinaceous, vegetable, and fruity foods—all spices should be avoided, as they undoubtedly tend to irritate the part affected. This leads one to the consideration of one medicine, viz., *Capsicum*, which I have sometimes used with good effect in inflammatory piles. The special indications are, frequent small mucous stool with intense tenesmus after it.

Capsicum seems to be of use in fluent as well as blind piles, but the bleeding, when it occurs, is rather a general oozing than a hemorrhage from the varices themselves.

With these means we shall not long have to treat a case of inflamed piles before the great pain and inflammatory state will have so far subsided that the patient can be moving about, and able to perform his duties more or less freely; and then comes the question of further treatment, so that a really curative method may be put into operation.

Perhaps the most important considerations now are, the sex of the patient, and the habit of the bowels. If constipation be habitual; if there be a feeling of obstruction or of dryness; if the stools are dry, and hard, and in largish masses, either smooth or of agglutinated masses of scybala, one must think of *Æsculus*, especially if there be a dull aching pain over the lumbo-sacral region. Before *Æsculus* was brought well before the profession as a remedy in hemorrhoids with constipation, one was in the habit of looking principally to *Nux vomica* and *Sulphur*, one or both, in such cases, but every one seems to think that *Æsculus* has almost superseded them.

It may be as appropriate a place as any to say here, for many years I have made it a great point in cases of chronic or habitual piles to insist on my patients adopting the practice of emptying

the rectum at night before going to bed rather than at the usual one of doing so in the morning. The disturbed congested part has the time of the night's rest to recover itself, and the patient is much more likely to be able to go about his duties next day. It is often difficult to establish the habit, for the bowels are apt to relapse into their old established method, will not go at night, and will go in the morning; but the gain is so great that the patient should be strongly urged to persevere.

After *Æsculus* I think there is scarcely a better remedy than *Pulsatilla*, whether for acute or chronic, whether fluent or dry, whether in male or female. Its marked influence on the venous system, its still more marked influence on the digestive functions and on the mucous membranes wherever they may be, should point to *Pulsatilla* as a medicine bringing about a group of symptoms very closely similar to that we find in piles. Of course, where the special temperament or constitution is strongly marked, we may look for the more striking effects, but there can be no doubt that *Pulsatilla* suits very many cases of piles even amongst men. It is by no means only the female sex that is to be influenced by this potent drug. Wherever passive congestions occur, and especially where there is tendency to chronic catarrhal conditions, *Pulsatilla* should be taken into consideration; even constipation is not absolutely a contra-indication, but when one has hemorrhoids, dyspepsia, catarrhal tendency, varicosis elsewhere than in the rectum, dysmenorrhea or spammenorrhea, it ought to suggest itself to one before almost any other drug in our Materia Medica.

Sulphur covers so much the same lines as *Pulsatilla* as to call for consideration in such cases; but the points in which it is chiefly distinguished are the presence of constipation, and the severe itching about the anus in sulphur symptoms.

Sulphur comes in alternately with *Æsculus* or with *Nux Vomica* in a large number of cases where there is constipation. Two or three days of the one and two or three days of the other is a convenient arrangement.

Nux is called for mostly among men, especially those who are given to the use of alcohol or of spices, or old dyspeptics, &c. (People who are subject to piles should, as a general rule, become abstainers.)

The constipation of *Nux* is one where there is want of expulsory desire, but where there is great relief after evacuation; there is frequent and ineffectual call nevertheless. The stool is hard or dry, there is pressure on the sacrum, but not so constant nor so marked as that from *Æsculus*. The piles are generally large and blind.

Collinsonia is a medicine of great value in piles, especially in those females who have inertia of the rectum, and general congestive tendency to the pelvis. It is especially valuable to pregnant women suffering from piles, and in the piles so often to be found in parturient women. Pruritus is here also a very marked symptom, while flatulence, colic, and tenesmus are additional indications for it.

While talking of pelvic congestion as a cause of piles, one must hardly pass by a classical remedy for such a state, though at the same time I will say that of late I have not used it, *Collinsonia* having taken its place—I mean *Aloes*, which produces a general abdominal, and specially a pelvic, congestion. There is very marked burning in the anus and tenesmus, often with faintness, and the bladder is often irritated.

I have already spoken of such cases of fluent hemorrhoids as are largely benefited by *Pulsatilla*—but though this last remedy is probably that of the largest range in piles in general, yet there are many cases in which one would much prefer employing *Hamamelis*, viz., such as present the fluent character in the most marked degree. Its wonderful influence on the venous system suggests it as a most valuable remedy, and experience carries out our expectation. It is especially in fluent piles with copious bleeding that it will speedily modify and arrest, and that without the fear one has been accustomed to hold of "the arrest of the hemorrhoidal flux."

The less fluent forms, if associated with varicosities or any indications of venous troubles, may make *Hamamelis* worthy of precedence before *Pulsatilla*, while the catarrhal state of the mucous membrane may give *Pulsatilla* the precedence.

My time is running short, but there is one medicine, viz., *Muriatic Acid*, I must mention, which I have found of very great value, especially among people advanced in years whose piles continue to trouble them. The piles are large and painful, very tender, and suggest that ulceration has taken or is likely to take place. In such cases there is a general adynamia, and an offensive odor of the breath and of other secretions is often present.

When hemorrhoids have gone on so far, or have been so frequently renewed, that the various layers of the rectum and anus become thickened, while the tumours themselves, the varices, create irregularities where ulcers are very likely to develop, and which from their position take peculiar forms as in so-called anal fissure, if any conditions consequent on piles can justify the use of the knife it will be these; but I am sure that in these cases, if the patient can and will give the time, the attention, and the

nursing that such a case requires, we may do perfectly well without the metal.

The great requirement is the careful and continual cleansing of the rectum, which must be effected with as little disturbance to the part as possible, almost absolute rest being needed by the patient. *Calendula* as a local application is most useful, and I have heard *Hydrastis* equally vaunted. The stools must be kept in a soluble condition, if possible, by means of suitable diet, *e.g.*, fruit, tamarinds, &c., &c. I am quite inclined to think that *Cocaine* in weak solution is not only justifiable, but of real utility in such cases.

I have used *Ignatia*, *Æsculus*, *Graphites*, and many other medicines in such cases with more or less advantage, but I think I have derived most benefit from the two latter.

I can say that I have cured a good many cases of fistula in ano without the knife, in fact I consider this affection much more tractable than the affection I have just been talking of, but it requires equally rest for its treatment, and careful nursing and syringing.

The remedies I have used have been *Silicea* almost exclusively *Calcarea* a little as internal remedies, and *Calendula* and *Hydrastis* and water-glass as local remedies.

I have at present here in Bath under my temporary care a patient who was cured by our friend A. C. Clifton many years ago (about fifty) of fistula in ano, and who remains cured now. He had been condemned for operation by one of the chief London surgeons of the day, went home to Northampton, submitted himself to Clifton's care, got cured, and went back to the surgeon, thinking he would be delighted to hear of a remedy for a disorder which he could only himself cure with the knife, and was quite astonished at the indignation that gentleman showed on hearing the said report !

It is scarcely needful for me to say that I have only attempted to give a glance at the medicines I have found of the principal use in these affections, that I will not longer keep you.—*Hom. World.*

CORRESPONDENCE.

BLACK RIVER FALLS, Wis., August 26, 1891.

EDITOR OF RECORDER: I was requested, as Secretary of our medical society. to send a notice to the different medical journals. A few of us met here at our office on July 11, 1891, and formed

a medical society. It is called the Western Wisconsin Homœopathic Medical Society, and includes the following counties: Jackson, Monroe, Clark, Eau Claire, La Crosse, Pepin, Buffalo, Trempealeau and Vernon. All of the doctors in these counties have been written to, and most all have or will join. Our first session was held August 11th, 1891, here at our office. We had a profitable time. All were well pleased. Our next session is November 11th, 1891, at Sparta, Wis. The following physicians were elected officers: Dr. Noble, of Eau Claire, President; Dr. Munson, of Warren Mills, Vice President; Dr. Churchill, of Black River Falls, Recording Secretary; Dr. King, of Fairchild, Corresponding Secretary; Dr. White, of Black River Falls, Treasurer.

Yours fraternally,

W. R. CHURCHILL, *Secretary*.

Black River Falls, Wis., August 26, 1891.

THE SOUTHERN ASSOCIATION.

The Eighth Annual Session of the Southern Homœopathic Medical Association will convene at Nashville, Tenn., on November 11th, 1891, in a joint convention with the Homœopathic Medical Society of Tennessee.

Many Homœopaths throughout the Northern States are aware of the active working spirit among the members of this Associations, and the power they are wielding for the general good of our school. Especially is this true in the Southern States, where Allopathy has been so dominant heretofore. The active measures taken at Birmingham in behalf of the Homœopaths in Alabama, in championing their claims for justice and equal rights, fully demonstrated the usefulness of this organization.

A most cordial welcome is extended to all the Northern Homœopathic physicians to meet with us at the Nashville meeting in November and enjoy the discussions on medical and legislative topics.

Many excellent papers from practical and original thinkers will be read—we have no time for text-book articles. If you have had an interesting case and cured it, or if death ensued, write it down briefly and read it to us at Nashville.

Fraternally yours,

WELLS LEFEVRE, M. D.,

Cor. Sec. Southern Association.

Hot Springs, Ark.

VETERINARY DEPARTMENT.

A Case of Spasm of the Diaphragm.

On June 8th I was asked to look at a mare, the property of Mr. Cashell, a near neighbor of mine. I saw her at 7:30 in the evening and found the following symptoms present: A violent thumping, which could be heard several yards from her; each thump would shake her whole body. Pulse about fifty per minute; breathing about twenty per minute. Upon placing my ear over the back, on either side of the spine, the thumping could be very distinctly heard. Then placing my ear over the heart the beating did not compare with the throbbing. The breath was drawn quickly into the lungs. The sides of the nostrils were drawn inward when the breath was inhaled. There was some stiffness of the limbs, neck and jaws. Prescribed *Nux Vomica* 1x, one dose, ten drops, in a teaspoonful of water. In one hour she was a great deal better. Then gave it in five-drop doses, to be given twice a day. On June 11th could not see any trace of the jerking. Has remained well up to the present time. This mare was unwell in the morning, June 8th, when she was worked from home to the station and back.

GEO. W. BREADY.

Norwood, Md., June 22, 1891.

Homeopathy In The Stable.

In a letter to *The Globe* Dr. Alfred Heath records the details of the treatment successfully applied by himself to a bad case of pink-eye in horses.

The following is the doctor's account of the case:—"A few years since I was asked by a nobleman to look at two of his horses suffering from 'pink eye.' From the symptoms I was led to prescribe *Mercurius Corrosivus* (*Hydrargyrum perchloridum*) or corrosive sublimate, in solutions, one part in one thousand parts of alcohol (as this drug produces symptoms exactly similar to those of pink-eye, it is absolutely necessary to give it in small doses). Of this preparation five or six drops were given in a small spoonful of cold water (easily put into the side of the mouth) three or four times a day. The effect was magical; in about three days both animals were well. Before taking the medicine they could scarcely turn in their stable; both had the characteristic pink-eye. If any of your readers should find the

remedy successful, perhaps they will confirm my experience. It may be obtained of any homeopathic chemist."

Upon this *Land and Water* comments thus :—A good deal of the prejudice against Homœopathy is based on the disbelief in the efficacy of infinitesimal doses, but herein, of course, lies an essential characteristic of the system, which seems to have much in common with the treatment of specific diseases which is associated with the names of Jenner, Pasteur, or Koch, cure being effected by the administration in minute quantities of the very poison by which the disease is caused. The proof of the pudding is in the eating, and prejudice must give way before such convincing examples of successful treatment.—*Veterinary Record*, May 9th.

Veterinary Science and Homœopathy.

At the meeting of the Royal Counties Veterinary Medical Association at Didcot, England, on Friday, June 26th, a paper was read at Mr. Sutcliffe Hurndall; entitled, "What has Contemporary Veterinary Science done towards the Advancement of the Healing Art, and wherein is there scope for further Development?" Mr. Hurndall considered the attempt to make bacteriology the beginning and end of everything medical and surgical had proved a complete failure. Mr. Hurndall then turned his attention to the region in which better things were to be looked for. He contended that Homœopathy—which he had practised even since he became a member of the profession—offered decided advantages over prevailing methods and customs, and gave many illustrations of the practice of the school of Hahnemann, which is based upon the principle "*similia similibus curantur*," or "like cures like."

Typhus in a Horse.

On October 12th was called to a sick horse at Newcastle. On inquiry I found that the horse was taken sick eight days ago and was being treated by the chief military veterinarian, who diagnosticated the disease Typhus. He had isolated the horse and ordered a special attendant. The sick horse, a tall, narrow-chested, chestnut gelding, half-blooded, six years old, was afflicted with a high-grade swelling, extending over the lower chest and abdomen, the sheath and all extremities, especially the hind legs; the swelling feels warm and is sensitive. In consequence of the

enormously swollen hind legs the horse cannot stir. Temperature of the whole skin uniformly warm. Pulse eighty, full and soft; beat of heart not discernible; auscultation reveals a fine, bubbling, purring noise in the right chest; the mucous membranes of the nostrils are reddened unevenly with a yellowish coat; appetite is impaired and defecation tardy; urine, voided at long intervals, of dark brown color; the animal is dispirited, hangs head and ears; eyes dull. The whole picture tallies with what the Vienna school designates as *Skin-typhus*. The sickness had been combatted by above-mentioned veterinarian with *Sulphuric Acid* in the drinking water, which, however, was rejected, and by frequently rubbing the skin, previously sprinkled with *Spirits of Camphor*.

Treatment: My first endeavor was to free the stables of the penetrating smell of camphor and to exchange the camphorous blankets for fresh ones. The erethical character of the fever and the implication of the mucous membranes, *i. e.*, the bronchiæ, induced me to precribe *Bryonia* 3, a dose every two hours. Moistened bran and middling, as well as small cut carrots, and a mixture of hay and cracked barley as food. October 15th, fever unchanged; mucous membranes of nostrils show petecchial spots; right nostril swollen; swelling of fore legs diminishing, that of the sheath and hind legs increasing. At the opening of the much swelled sheath the outer skin is gangrenous and pieces of the breadth of a hand are being detached. All movements of the patient are made with the fore feet; the hind legs are as if rooted in the ground. Prescribed *Lachesis* 6, every two hours, in water.

October 17th. Patient, standing up until then, laid down; lies flat on his side; very restless; shows inward pain by frequently looking toward his side, and by vibrating motions of the legs. Pulse, 90; groaning at times; temperature of the back uneven, lessened at the extremities. Food is rejected, but his great thirst is assuaged by eager gulps, his head having to be raised to enable him to drink. On account of these symptoms and of the fact that the day previous a sharp north wind had been blowing, and a slight cold might have been contracted, *Aconite* 3, every hour, was given, which induced a copious transpiration towards noon. As the pulse was lower, but the restlessness and thirst kept on *Arsenicum* 3 was substituted for *Aconite*, three doses in the afternoon and one every four hours next day.

October 19. Patient managed to rise, after several attempts, without assistance, but tottered for weakness so that a hammock was stretched under him. Although only lying down for about sixty hours, on a well bedded floor, the prominent parts of that

side were so sore that large portions of the skin seemed to be deadened and gangrenous. However the swelling had gone down considerable and on his hind legs a yellow serum is exuding. Breathing is normal; pulse down to seventy beats; the beating of the heart is recognizable. Thirst is lessened and a lively appetite prevails. Bran and oats are given and clean hay. Oft recurring urging to urinate while voiding but small quantity of pale urine induced me to give three doses of *Lycopodium* 3.

October 24th. The red spots on nostrils gone; the sheath and hind legs very little swelled; pulse down to sixty; appetite very good, enjoys his oats; urine passed in large quantities, turpid, yellow and saturated; the hammock is taken away; the animal seems to like motion and sometimes lays down. The sore spots are moistened with diluted glycerine mixed with arsenic solution; *Arsenicum* 3 is administered, one dose a day.

October 25th. The animal is free from fever, is getting frisky, cuts capers while being led around, sore spots are healing up, and on October 30th I could pronounce the horse to be perfectly cured, and that it could presently be put to use again.

The cure of this desparate case created quite a sensation and was warmly commended by the owner.—*Dr. Boehm, Veterinarian, in N. Surany, Popul. Zeitschr., Vol. IX., No 4.*

BOOK NOTICES.

International Homœopathic Annual. Editor, Dr. Alexander Villers, Dresden. Volume I. English edition. Leipzig, 1891. 175 pages. 8vo. Paper, $1.50.

This is a new undertaking and one which if properly encouraged may be of great value in time. Its aim is to be an international Homœopathic Year Book, Bibliography, Directory. Dr. Villers says in his preface "Homœopathy is spread all over the world, its doctrines are proclaimed in every tongue, every civilized nation has helped to work out its problems, but up to the present day a connecting link has been wanting to bring the work of the individual to the knowledge of the whole body. I have tried to supply this want, and in this volume submit to the critical examination of the public the first fruit of my endeavor. In the interest of Homœopathy and without an eye to profit we have incurred the risk of this great undertaking, and shall carry it out by our own exertion till the coöperation of adherents to

Homœopathy shall support us." Dr. Villers then comments on the carelessness or utter indifference with which he was met in his efforts to compile an international directory, but concludes: "The publisher and editor will work on patiently; will spare neither trouble nor expense, and publish volume on volume of the *International Homœopathic Annual*, till it has become a settled habit of the Homœopathic public to communicate to the editor of this annual everything that is of interest to Homœopathists." That address, we may add, is Dr. Alexander Villers, Dresden, Germany.

It is to be hoped that Dr. Villers' self-sacrificing work in the interest of international Homœopathy will meet with encouragement and success. The present volume is admittedly imperfect in some respects, but a work of this sort grows rapidly towards perfection with experience, and the greater assistance given to the editor as he, and his work, become better known. The next volume will be published in 1893.

Syllabus of the Obstetrical Lectures in the Medical Department of the University of Pennsylvania. By Richard C. Norris, A. M., M. D., Demonstrator of Obstetrics, University of Pennsylvania, etc. Second edition. W. B. Saunders, Philadelphia, 1891. 198 pages. Cloth, $2.00.

This book does not belong to the question and answer series, but is a syllabus of the subject of which it treats. The volume is interleaved, every other leaf being blank. The author says: "This syllabus has been prepared to meet the difficulty of accurate note taking, which most medical students encounter. . . . The design of the book, therefore, is to secure for the student a logical and consecutive outline of his work, and to aid him in classifying the knowledge he acquires in the lecture room." The general appearance of the book is very pleasing.

Angina Ludovici, a pamphlet, reprint, has been received from E. Lippincott, M. D., Memphis, Tenn.

Angina Ludovici is, in Anglo Saxon, gangrenous inflammation of the neck. Dr. Lippincott made good cure of this ugly customer and he did it by finding the *similimum*, for "without it I could not have reported the cure of the only case of Angina Ludovici that I ever saw."

"**The Climatologist.** A monthly Journal of Medicine, devoted to the Relation of Climate, Mineral Springs, Diet, Preventive Medicine, Race, Occupation, Life Insurance and Sanitary Science to Disease," is the comprehensive title of a new maga-

zine, No. 1, Vol. I, bearing the date of August 15, 1891. It has a list of thirty-four editors and associate editors, headed by John M. Keating, M. D., as chief, and is handsomely published, by W. B. Saunders, Philadelphia, Pa. The price is $2.00 a year.

We have received specimen pages of the forthcoming Standard Dictionary. It will have many distinguishing characteristics, more than we have space to note, from all other dictionarie some of them of decided originality and utility. Messrs. Funk & Wagnals, New York, are the publishers and will furnish specimen pages to all who desire them.

Kali Chloricum. A Lecture. By Charles S. Mack. M. D., Ann Harbor, Mich., is the title of a pamphlet reprint from *Hahnemannian Monthly*.

"**The City of San Antonio and Southwest Texas as a Pulmonary Sanitarium**" is the title of a little pamphlet, by Dr. C. E. Fisher, enthusiastically lauding the air and climate of southwest Texas. Florida, southern California, Minnesota and Colorado are not in it with that part of Texas, according to Dr. Fisher. He has opened a Homœopathic sanitarium and infirmary, the first in Texas, at San Antonio.

"**Who Is a Hahnemannian?**" by C. T. Campbell, M.D., of London, Ont., and "Hahnemann's Methods and Other Methods," by Geo. Logan, M.D., of Ottawa, Canada, are the titles of two papers read before the Canadian Institute, and bound together in pamphlet form.

"**Epilepsy as a Hystero-Neurosis**" is the title of a pamphlet by James C. Wood, M.D., Professor of Obstetrics, Gynecology and Paedology of the Homœopathic Department of the University of Michigan, at Ann Arbor. It was read by him before the International Congress at Atlantic City last June.

BOOKS IN PRESS.

Compendium of Materia Medica, Therapeutics and Repertory. By A. R. McMichael, M. D., Hahnemannian Publishing House.

This work, original in conception and execution, promises to mark an epoch in Homœopathic prescribing. Any observant reader of Homœopathic journalism will have noticed that in Homœopathy there are two attitudes towards the Materia Medica; the right or the wrong of either is not be inquired into here, but merely the unquestioned fact recognized. One prescriber would

not omit a symptom from the Materia Medica, but would rather have them, if anything, augmented. The other wants some skilled hand to undertake the herculean task of mapping the vast, and to him, almost trackless wilderness of the Materia Medica, in a scientific manner, opening highways to the remedies that they may be used in the cure of disease and not for the confusion of the practitioner who honestly sets about study of a given case. This is the work Dr. McMichael has undertaken and advanced practically to completion. It would be almost impossible for any one to convey a really *clear* idea of this work by a mere description, but when the book is completed the very orderly manner in which the symptoms are arranged, their clearly seen application to diseased states, and the relationship the various remedies bear towards each other will be comprehended and must make the *Compendium* a most useful guide to the sought for remedy.

Dr. McMichael, in his paper read before the Homœopathic Medical Society of New York, and reprinted in the July number of THE RECORDER said:

"In considering the disease of a patient, that portion of the body which is immediately affected always encircles within its influence other portions which naturally lie in its track, or are so connected that their consideration becomes a necessity; and often, indirectly, the whole body may be so affected as to become an object of interest in order to complete our prescription."

In a few words the foregoing gives the spirit, so to speak, of the new work. It will take, say, the stomach as the seat, or centre of the disease, and for each remedy will give the verified symptoms of the stomach itself and the symptoms which are encircled in its influence. So with the heart, lungs, head, etc.

Necessarily the work will require several volumes, which, from its plan, must be quartos, but each of these volumes will be a rounded out and complete entity quite independent of its fellows. If the stomach be the seat of disease that volume is consulted and all the symptoms centering there, and radiating thence, of all the remedies applying to that organ will be laid in a most orderly manner before the reader; the nice shades of distinction between them are easily traced; and, lastly, each volume will be repertoried, if the term be permissible, in a manner that must be seen and consulted to be thoroughly appreciated. The first book, it is hoped, will be ready by the first or middle of December.

A Materia Medica Primer. By Timothy Field Allen, M. D.

This book is well in hand, the first of the manuscript being in

the printers hands. It will be a companion volume to the new *Bœninghausen Pocket-book* and of the utmost value to beginners and students, giving them, as it were, the ground plan, the foundation of the various remedies which when thoroughly mastered forms a basis on which fuller knowledge can be arranged in an orderly manner. As its name indicates it is the primer, the A, B, C book, of the Materia Medica.

When the A, B, C's are mastered the next step is easier. Homœopathy has flourished without its primer in the past, but the path of its students, in the future, will be made easier by this book. The work of the pioneers in a country is a grand one, but their children occupy the same country and the roads of the latter day are easier and smoother than were those of the former.

A Homœopathic Bibliography of the United States. By Thomas L. Bradford, M. D.

Dr. Bradford is nearing the end of his long and laborious task—that of making a complete bibliography, for the United States, of all the Homœopathic books, magazines and pamphlets with condensed statements, data and histories of the Homœopathic societies, colleges, hospitals, asylums, homes, nurse schools, dispensaries, pharmacies, publishers, directories, legislation, libraries and principal books against Homœopathy. It is a great work, a huge work, that of collecting all this data, and for all time to come will be a most exceedingly valuable book. One especially valuable feature of Dr. Bradford's book will be the giving of the names of the original officers of all the various Homœopathic societies, etc.

The book will be one of which all Homœopaths will be proud and ought to lend a hand in assuring its publication, for this will not be undertaken until enough subscriptions are received to assure cost of paper and printing. The book will run from four to five hundred pages. The price will not exceed three dollars. Send in your name as a subscriber on a postal. Subscriptions may be addressed to the author, Dr. Thomas L. Bradford, 1862 Frankford avenue, Philadelphia, Pa., (he will also be glad to hear from authors, with a view of further verifying the titles and dates of their books and pamphlets), or to any of the Bœricke & Tafel pharmacies.

Greater Diseases of the Liver. By J. Compton Burnett, M. D.

Before the next number of the RECORDER appears this the first book published by Messrs. Boericke & Tafel under the new copyright law, will be out. Of its matter nothing need be said, the author's name being a guarantee that it will be worth reading and also interesting—too often it happens that valuable matter is so dressed as to be most sleep-provoking to the reader. The price will be considerably lower than those at which Dr. Burnett's books have been heretofore sold, this one being 50 cents *net*, cloth binding. Dr. Burnett's last book, *The New Cure for Consumption*, is exciting a good deal of quiet attention.

Homœopathic Recorder.

PUBLISHED BI-MONTHLY BY

BOERICKE & TAFEL,

1011 Arch Street, Philadelphia, Pa.

9 North Queen Street, Lancaster, Pa.

SUBSCRIPTION, $1.00 PER ANNUM.

Address communications, books, etc., for the Editor to E. P. Anshutz, P. O. Box 921, Philadelphia, Pa.

DR. WAHLE, chemist to Hahneman, left in manuscript a proving of parafine. His son in after years gave the manuscript to Dr. Held, who translated it into Italian for the *L. Omeopatia in Italia*. From the Italian Dr. Robinson translated it into English, and that translation was published in the RECORDER, September, 1890. From the RECORDER it was translated into German again and published in the *Allgemeine Hom. Zeitung*. From the German it once more was translated back into English for *The Chironian*. A comparison between the two English translations will reveal some divergence, and as the remedy is exciting some interest at present it may be well to remember that Dr. Robinson's translation stands nearest to the original. It will be found in the September number of the RECORDER of the year 1890.

THE *Baltimore American*, August 5, announces that the Board of Directors of the Southern Homœopathic Medical College and Hospital, of that city, have purchased, for $18,000, Calvert Hall, on Saratoga Street, west of Charles Street, and will at once make extensive alterations in the property for the uses of the Southern College. This will give the young Southern College ample elbow room, and commodious quarters for all of its departments.

A HOMŒOPATHIC physician in writing an order to Messrs. Boericke & Tafel for goods added the following: "Let me say here that I have received the greatest benefit from your Saw Palmetto, and I *know* it be at least four times as strong as that of another well-known Homœopathic house which claims to make the best goods." The steady aim of Boericke & Tafel is to furnish the physician with medicines on which he can implicitly rely, and in the long run, any physician will find it far more satisfactory to use their medicines. The small savings made here and there by patronizing cheap pharmacists are not really profitable to the practitioner.

THIS is what Hahnemann has to say on the more or less discussed question of the wearing from porcelain mortars by the process of trituration. It is to be found as a foot-note in *Chronic Diseases*, p. 165.

"There are hypercritical Homœopathic physicians who were afraid that even the sugar of milk might obtain medicinal qualities from being long kept in a bottle, or from long trituration. Long continued experiments have convinced me that this apprehension is unfounded. Both the raw and the prepared sugar of milk may be taken as nourishment in considerable quantity without the least disagreeable symptoms being experienced from it. Fears have also been entertained that, in triturating the medicinal substance in a porcelain mortar, particles might become detached from this latter, and that the triturating process might change them to powerfully active *silicea*.

"To ascertain whether such fears were founded, I caused one hundred grains of sugar of milk to be triturated with a new porcelain pestle in a porcelain mortar, the bottom of which had been recently polished; thirty-three grains were taken at a time. They underwent the process of trituration eighteen times, each trituration lasting six minutes. Every four minutes the mass was stirred up with a spatula. The object of this frequently repeated trituration, which lasted in all three hours, was to impart medicinal qualities, either to the sugar of milk, or, at any rate, to the particles of *silicea* which might have been separated from the mortar; but, from experiments which I have made upon highly susceptible subjects, I have been obliged to infer that the prepared sugar of milk is no more medicinal than the sugar in its raw state; its only quality is that of being nutritious."

A MEDICAL gentleman signing himself Dr. W. S. Strode, Bernadotte, Ill., in the *Western Medical Reporter*, makes the following fling: "Little did Hahnemann think that in the year 1889-90 the system which he promulgated would be taken up and elaborated—" and so on, and so on; the gentleman uses so many words in making his point that space and the importance of his paper does not warrant a full quotation. The point is that Christian Science and Homœopathy are the same thing, and he seems to labor under the impression that the former first appeared in "the year 1889-90." If Dr. Strode doesn't know any, better and really thinks that Homœopathy and Christian Science are the same, he should inform himself on the subject by reading a little; but he should have done this before he set about instructing the world on a subject of which he uninformed.

THE

HOMŒOPATHIC RECORDER.

VOL. VI. PHILADELPHIA AND LANCASTER, NOV., 1891. NO. 6.

THE PHARMACY OF TINCTURES.

Read before the American Institute of Homœopathy.

The writer has been honored by a call from the Executive Committee for a paper on the "Pharmacy of Tinctures," and begs to present the following in response:

In Homœopathic pharmacy no generally accepted rules for the preparation of tinctures prevail at the present time. Outside of the Continent each pharmacist follows his own preference in making what Hahnemann first styled "Mother Tinctures," with this general observance, however, that all, more or less faithfully, adhere to Hahnemann's precept to make all tinctures from the fresh succulent plants, as far as obtainable, gathered from their natural habitat at the time of their utmost vigor. All Homœopathic pharmacopœias, with one exception, acknowledge and uphold this principle, and to its general observance much of the sustained success of Homœopathy is due, and this also is the cause of the acknowledged superiority of our Homœopathic tinctures over those of the drug stores.

But while the Homœopathic tinctures of the different countries are similar as to constituents they differ in strength, and a uniform standard is very desirable.

Hahnemann adopted the juice of the plant as a unit, and divided the medicinal plants into four classes, as follows:

Class 1 comprised the most succulent plants. The expressed juice of these was mixed with an equal quantity of pure spirits of wine, set aside for a week and filtered, the product constituting the mother tincture.

Class 2 comprised plants less succulent and to three parts of the comminuted plant were added two parts of alcohol, this was macerated, expressed and filtered.

Class 3 comprised plants still less juicy, and to one part of plant were added two parts of alcohol, then macerated, pressed and filtered.

Class 4 comprised dried drugs such as *Ignatia*, *Ipecac*, *Nux vom.*, etc.; and to one part of the comminuted drug five parts of alcohol were added, and after eight or more days the tincture was decanted and filtered.

In accordance with these rules all mother tinctures were prepared until, in 1840, Carl Gruner, of Dresden, brought out a new Pharmacopœia, deviating from Hahnemann in that he divided the plants into three classes, of which Class 1 comprises the dried drugs, which he macerated with alcohol for two weeks in the proportion of one part of the drug to ten of alcohol. His Class 2 comprises very juicy plants; to the expressed pulp or magma, of these, alcohol equal in quantity by weight to the juice pressed out is added; after a few day's maceration the alcoholic tincture is expressed and the two liquids, mixed and filtered, give the mother tincture. His Class 3 is identical with that of Hahnemann.

In 1843 Dr. Buchner, of Munich, published a Pharmacopœia, strictly following Hahnemann's precepts. His work is official in Bavaria to this day.

In the year 1872 Dr. Schwabe, of Leipzig, issued his Polyglot Pharmacopœia, printed in five languages: he also followed Hahnemann's original directions adding remedies later introduced in their proper order. He omits all descriptions of plants and mode of preparing chemicals with the exception of such as are not usually found in old-school handbooks.

In the year 1882 the American Homœopathic Pharmacopœia was issued. This adopted Schwabe's compilation of Hahnemann's processes with few modifications. But this work gives in addition a full description of plants and mode of preparing chemicals etc., thus rendering all references to old-school handbooks superfluous.

Several other Pharmacopœias were issued by Deventer, Caspary and others, but never secured general acceptance.

In 1870 the British Homœopathic Pharmacopœia appeared. This also gives a description of plants and tests for chemicals. In the preparation of medicines, however, a new departure is made, the compilers aiming at greater accuracy in tinctures. To this end it is required that a given quantity of a fresh plant be first thoroughly dried and weighed in order to ascertain the amount of water it contains, and then the alcohol to be added is to be so proportioned that each minim of the finished tinctures

represents one grain of the dried plant or its soluble properties. This entails great labor, and seemingly to no practical purpose. Why should our school imitate the Allopaths in basing strength of tinctures on a certain proportion of the dried plant while using fresh plants whenever available? It is claimed that the English method is more accurate, but it must also be conceded that only a relative accuracy can be attained after all, for plants will contain varying proportions of extractive matter with varying seasons, and only a careful assay of the alkaloids contained in the plants, in each case, will ensure accuracy.

A more rational way would seem to be to base the strength of our tinctures on a certain proportion of fresh plant. This would be an improvement on the old ways in that a definite quantity of mother tincture be made out of a given weight of fresh plants. Naturally the tincture would vary somewhat in the proportion of juice to alcohol, for in a dry season plants are less juicy, or contain less water, than in a wet one. In practice however this variation would be of little or no moment. Or is there any one who will maintain that six drops of a tincture or dilution mixed with water and given in teaspoonful doses will materially differ in the effect from four drops in the same amount of water? And surely no greater discrepancy in strength need be apprehended; the identity of the plant, its proper habitat and the right time of collection being of chief importance.

It would seem, then, to be most practical and desirable that the future standard Homœopathic Pharmacopœia direct that all fresh plant tinctures be made in such proportion that one or two pounds, as agreed upon, represent one pound of the fresh plant or part of a plant, and that five or ten pounds of a dry plant tincture, as decided upon, represent one pound of the crude drug. This would give us a reasonably uniform strength, and these simple directions would readily be accepted by all, while the complicated system advocated by the British Homœopathic Pharmacopœia would defeat this object. It would, in the writer's opinion, surely fail of acceptance on the Continent even if adopted here, as it is in England. and this is a point worth serious consideration.

Another consideration would be that country practitioners frequently find opportunity to gather herbs and roots, while driving through their districts, for making their own tinctures, which, in accordance with above mentioned simple rules, would be an easy matter; whereas few would go to the trouble to follow out the complicated directions mentioned above, and so would either be led to make a tincture at variance with the new Pharmacopœia or abandon the practice altogether.

that tell me "Old Sam" has finished his morning round of visits, and then his cheery greeting, and then the paper for the *North American* that must be read and criticised—and, I must add, accepted in spite of all criticisms: his heart continually running away with his head. And those days are forever gone; and the old familiar face is gone; and the warm heart is cold; and he is resting near the "Golden Gate"—so far from Munich; so near the great white throne!

* * * * * * * *

Dr. Lilienthal was one of those, all too few nowadays, with whom Medicine is a calling—not a trade. To it he gave his whole self without reserve. He purchased its literature with reckless prodigality, though he was wisely frugul in all other expenditures. He seemed to live in the spirit of the Hahnemannian dictum: "In an art preservative of human life, ignorance is a crime." From an intimate acquaintance with both I can truly declare that Samuel Lilienthal spent more on medical literature in a single year than did the late Dr. Croesus in his whole lifetime. I believe that Croesus left far the larger estate, and of a surety I do know that he left it, for althongh they sometimes put a pocket in a shirt I have never heard of one in a shroud.

Lilienthal was also an indefatigable reader. Many suppose that this implies a limited practice; the inference is not valid in his case. He was indeed a busy practitioner. How did he find time to read? By utilizing the spare minutes. No sooner had he laid aside his visiting case than he picked up the journal that had been read up to the very minute of his starting upon his round of visits. Or if he did not begin reading the moment he entered his office, he took the unfinished manuscript from his portfolio, and with his nose close to the paper, for he was short-sighted, began writing at once. I have always detested interruptions when writing; but he husbanded the few minutes before dinner would be ready, and this will explain his productiveness. To his earnestness he added industry. I wish it could be computed for how many years of his life he had a pen in his faithful hand. It was a matter of surprise to me how much his pen could put upon a page. He wrote as small a hand as Hahnemann; and perhaps both learned that economy in the early days when writing paper was much dearer. Dear old soul! he actually prided himself upon his chirography, which often looked as if it had been done by a choreic spider on roller skates. We once edited journals that were printed at the same place, and I remember telling him how an incensed compositor had *exorcised*

me for the quality of my pot-hooks. "Is tat so?" said he, "Why, dey quarrel for mine." I did not tell him that the irate compositor assured me that he would be blanked if my "copy" wasn't almost as poor as Dr. Lilienthal's. But no compositor in that whole establishment would have breathed a word of complaint to Lilienthal himself, for despite his crabbed manuscript his sunshiny manner had won them all.

Only for Dr. Lilienthal the *North American Journal of Homœopathy* would have perished of inanition long ago. How chivalrously he came to the rescue; he felt as if fealty to those who had inaugurated that magazine demanded that he should put on his armor and leap into the gulf. How persistently he would buttonhole Tom, Dick, and Harry! I believe he would cheerfully have published a paper on *Sulphur*, from the "Old Harry" himself, on the *experto crede* principle—for a paper for "*De Nort American.*" And how incessantly he translated, and translated, and translated for it! O, the drudgery of translating! No glow of composition to warm one; a mere hewing of wood and carrying of water for another! When I recall all that he has done I can but feel that he richly deserved the "translation" which befel him on the night of the second of October.

When one reads his "Therapeutics" it is to wonder when he found time to make so exhaustive a compilation. The secret is that whatever of note he read he made a "note" of on the spot. He didn't put it off uutil the more convenient season; down it went on the spot. He had many interleaved volumes, and in the appropriate one went the desired observation that he had just read. This is the only method by which one always gets the money's worth out of a book or journal. My only objection to his excerpts was that, like Hering, all was fish that came to his net. It mattered not who vouched for the printed statement, he accepted all without a challenge because he thought all as earnest and as truthful as himself. Alas! the statements in our literature are like the veal pies of which Weller declared "they are werry well when you knows the man wot made 'em." Our dear "Old Sam" would dine on a "deacon" as devoutly as though it were the "fatted calf" itself.

As an editor, I think he was lacking in the critical faculty, and I doubt if his editorial work will prove anything other than ephemeral. I do not think that any of his utterances on any of the questions that have arisen within the last twenty-five years, have, in any degree, moulded the opinions of his readers. He could be steadfast to his own convictions—no one more so—but he could not follow his convictions with fire and sword when

"the heathen raged and the people imagined a vain thing." When the fiery Lippe would fulminate his anathemas like a pistareen Pope, I recollect that Lilienthal would write him letters of such stern rebuke that I used to wish one of them might be published in the *North American*, if only to assure its readers of the sex of its editor. But it is due a dead man to say that he believed in the power of a "milde macht," which, I think, is vain when one is fighting the devil or any of his creatures.

* * * * * * *

I remember a portrait that hung in his bedroom; it was that of his Rachel who, long years ago, left him lonely, but with a love in his heart that time could not change. I have often wondered if it was not this unquenchable love for his dead wife that made his manner so charmingly tender and winning to all women. There was a blending of knightly courtesy with a fatherly fondness, and wherever he came he conquered. And now time has no mystery for him. A thousand years are but as a day, and the wife's face is not worn with pain, and the parting is as a dream that has faded. O, death, whose is the victory!

Blessed be God, that every stroke which makes the world poorer for us who linger, makes eternity the richer. The eye grows dim, the hand forgets its cunning, the memory falters, the tinsel of Vanity Fair grows tawdry, the illimitable boundary of the Unknown maketh the wise man become as a little child, and the years press heavily as a burden, and the City of God shineth in our nightly dreams with ineffable beauty, and the heart is filled with longings unutterable; and lo! the messenger cometh bringing the peace unspeakable.

Ann Arbor, 12th October. S. A. J.

RANULA AND POLYPUS.

The article on *Thuja*, by Dr. Geo. Hering, in the September number of the HOMŒOPATHIC RECORDER, recalls to my mind several excellent results had with the drug in cases that have came under my care. The most striking of these is illustrated in the case of a man who came to consult about a growth under his tongue which he feared would result in cancer. He explained that it had several times been removed surgically by members of the old school, who assured him each time that it would never return but that it invariably resumed its full size in about three weeks' time. As a last resort, and at the suggestion of some of

his friends, he decided to try Homœopathy. An examination showed the presence of a bluish-looking growth as large as a child's play-marble directly under the tongue on the right side, causing him great distress and untold anxiety as to its future. It was diagnosed as a Ranula and he was given what to him seemed a few insignificant powders of *Thuja* 1x, with instructions to take one every four hours and to return as soon as they had all been taken. He left the office less the faith supposed to be essential to a cure of affections by Homœopathic means. At the expiration of four days he again presented himself and reported a decided decrease in the size of the tumor and a consequent belief in his ultimate recovery.

The prescription was renewed, and in less than three weeks the tumor had entirely disappeared, and although that has been three years ago he has never had any signs of a return, and frequently expresses his belief in the virtues of Homœopathy by availing himself of its benefits whenever ill.

Another instance of its remarkable effects was shown in the case of a public school teacher who had suffered from childhood with an offensive discharge from his right ear with almost total deafness in that ear. Immediately after a cold snap of weather he was troubled with considerable pain in his head, and I was consulted to treat what he termed an abscess in his ear. A careful examination showed a small growth just appearing on the membrana tympani which I took to be an abscess formation and prescribed accordingly. In about three weeks after this prescription he again presented himself at the office and asked me to make another examination, as he felt that there was something growing in his ear and that he could touch it with his finger, but added that it gave him no pain or discomfort, and was not even sore. The examination showed the presence of an aural polypus which had grown from the little elevation noticed sometime previous.

I prescribed *Thuja* 1x and, giving him a bottle of *Thuja* φ, ordered it painted every night and morning, and to take the powders, one every four hours. As he taught school some distance away from my home I was unable to see him as often as I wished, but told him to come and see me when he came in the neighborhood.

He presented himself in two weeks, and the polypus had grown to such an extent that it entirely filled the external auditory meatus, and I suggested its removal, although fearing that I should have much difficulty in performing the operation, as it seemed as if it would be almost, if not quite, impossible to insert

even the small wire of the ecraseur between the exterior of the fundus of the polypus and the interior of the meatus.

He objected to surgical measures, saying that he had so much trouble all his life with that ear that he was afraid of the consequences, and requested to have the medicinal treatment continued. I renewed my prescription of *Thuja* 1x, and directed painted as before, requesting him to come in a week. He came and the polypus seemed to be about the same, no pain, no distress, no headache, no symptoms. Renewed prescription and gave directions as before, still having faith in *Thuja*. The next week it was smaller, and next still smaller, and so on every week until at the end of the seventh week it had entirely disappeared; and although that has been over eighteen months ago he has never complained of that ear since.

W. H. POUNDS, M. D.

Paulsboro, N. J., Sept. 29, 1891.

OLIVE OIL IN GALL-STONE COLIC.

The subject of the action of olive oil has been recently discussed in many quarters, and the discussion revealed a wide divergence of opinion. With a view to settling the matter the therapeutic section of the Philadelphia Polyclinic Society sent out circulars making inquiries concerning the matter, and collected fifty-four cases of the disease treated with olive oil. The *New York Medical Journal* (October 3, 1891), publishes a chart of these, and makes the following comment on it:

"An analysis of these fifty-four cases shows that there were about one-third more females than males who suffered from gall-stone colic; that two died, that in three negative results were obtained, and that in fifty, or 98 per cent., positive relief was afforded. These results make a better showing still when we consider that one of those who died was suffering from adhesive obstruction of the bile ducts—a disease which no procedure, either medical or surgical, could have remedied. Now do these figures give us a true estimate of the favorable action of olive oil in this disease? for two of the observers state that they have treated forty other cases of biliary colic without a failure, but of which they had kept no record—making in all a collective return of eighty-nine cases—showing the great value of this drug."

"These cases illustrate, then, the positive efficaciousness of sweet oil in the treatment of gall-stone colic, and the question

naturally arises, therefore, as to the manner in which this agent acts. Dr. Rosenberg's experiments (Ueber die Anwendung des Olivenöls bei der Behandlung der Gallensteinkrankheit, *Therapeutische Monatshefte*, December, 1889, S. 542) demonstrate beyond a doubt that it largely increases the quantity of bile secreted, while at the same time it diminishes its consistency. But how does it accomplish this? Does it stimulate the biliary channels by coming in contact with their openings into the alimentary canal? Or is it decomposed into fatty acids and glycerin through the instrumentality of the pancreatic juice, and does the 'glycerin so liberated exert in the duodenum an action similiar to that which takes place when it is introduced into the rectum,' causing a powerful reflex peristalsis—an ingenious theory suggested by Dr. D. D. Stewart? Or does it act in accordance with the hypothesis formulated by Virchow, who shows from his own experiments (*Therapeutische Monatshefte*, 1890, S. 86) that it is obsorbed from the alimentary canal, is excreted by the liver, and is thrown into the bowels again through the biliary passages? The last of these theories appears to be most rational, because it explains certain well-known features in its action, and also places it on a level with the action of other cholagogues. We may conceive, then, that the beneficial influence of oil consists not so much in dissolving the biliary concrements as it does in increasing the biliary excretion, in flushing, and in lubricating and washing out the passages of the liver.

"Another point of interest in this collection is as to the proper dose of the oil. Are the large doses necessary which were administered to most of the cases in this collection? It appears not, for eight of the cases (Nos. 11, 12, 15, 16, 22, 23, 24, and 25) received only dessert-spoonful doses every three or four hours, and apparently with the same prompt and positive relief as that which was afforded by doses of from five ounces to one and two pints. If this should be confirmed by further experience, it would be a great practical gain in view of the fact that a great many persons show a strong aversion to all kinds of oil, especially if they are to be taken in large quantities."

From the chart we select the following typical cases:

Case 2. By Dr. H. T. Bahnson, Salem, N. C. Patient aged 50. Male. Seat of pain, right hypochondrium. Jaundice. Previous attacks, "a great many." "Other remedies, *Antipyrine* hypodermically, with temporary relief." "Took one pint (of olive oil) in two hours; complete relief." "No return for more than two years."

Case 6. By Dr. J. J. Cox, High Point, N. C. Patient a woman,

aged 28. Seat of pain, gastric region. Jaundice. Previous attacks, eight or ten. Other remedies, *Sodium phosphate*, without benefit. Took, of olive oil, "one pint at a single dose. Complete relief." "No recurrence within a year."

Case 10. By Dr. Gloninger, Lebanon, Pa. Patient, a man, aged 31. Seat of pain, right hypochondrium. Jaundice. Previous attacks, "once every three weeks during fourteen years." Other remedies, "morphine and anæsthetics; temporary abatement." Dose of oil not stated, but after taking it "free from attacks for eleven months." "Previous sufferings were intense, requiring large doses of narcotics."

Case 20. By A. F. Magruder, M. D., of U. S. N. Patient, male, aged 46. Jaundice. Two previous attacks. "Ten hours after taking one quart of oil in divided doses, two large gall-stones discharged in the stools. Steady improvement." "Bowels had not been moved for four days before the oil was taken. Singultus existed for twelve hours before bowels moved."

Dr. D. P. Boyer, of Philadelphia, says he "treated about ten cases with the oil, and in all these was either a cure or benefit." His case (32) was a woman, and she "only received the oil for two days, when she was entirely relieved. Passed a number of calculi."

Case 34. By Dr. E. R. Mayer, of Wilkesbarre, Pa. Had about two attacks a year for fifteen years. "Six ounces of the oil gave prompt relief. This was the last attack the patient had."

Case 37. By Dr. H. C. Bloom, Philadelphia, Pa. Male, aged 68. Two previous attacks. Other remedies gave only temporary relief. "Dessertspoonful doses of the oil gave prompt and decided relief."

Case 41. By Dr. R. Kennedy, Kingston, Ont. Adult female. Suffering for years from attacks. "Full doses of the oil for two consecutive days. No return. Passed a large number of calculi. Relieved two other cases of gall-stone colic with the oil."

Dr. Gay, of Buffalo, says that "Olive oil is as much a specific in gall-stone and colic as sulphur is in scabies."

Case 43. By Dr. W. F. Langdon, of Cincinnati. "An operation had been suggested, but with the improvement (from olive oil) it was abandoned."

Case 46. By Dr. S. Rosenberg. Had "Liver enlarged and sensitive; gall bladder enlarged." Attacks "almost daily for five years. Obtained no relief from other remedies. Large doses of oil for two weeks. Relief. Free from attacks for eighteen months, up to the time the report is made. Passed hard concretions."

Of the unfavorable results, Case 5, by Dr. G. R. Fortiner, of Camden, N. J. After taking the oil for ten days, died. "Post-mortem investigation showed complete adhesive obstruction of bile ducts. Patient received a blow in hepatic region some time before."

Case 13. Also died. In neither this nor the case just quoted had there been any previous attacks.

Case 14. Obtained no relief from the oil and, like the two preceeding ones, had had no previous attacks of the complaint. The remaining negative case merely states "negative results."

JOURNALISTIC "LAGNIAPE," THE "READING NOTICE" NUISANCE.

If there be any who do not know the meaning and significance of "lagniape," we will tell them. It is a word much in vogue in New Orleans and elsewhere amongst the Creoles, and signifies a bonus, a premium, something given for "good measure," or for good will; something "thrown in" when a purchase is made. So general is the custom in New Orleans that if an urchin be not rewarded by a stick of candy, or an apple, along with his purchase of a nickel's worth of soap or starch, for instance, he feels defrauded of his rights. The custom is recognized and adhered to by all the hucksters and grocers, market folks and retail dealers generally.

Whether known by that name or not, does not matter much,—it would smell as bad by any other,—the practice has invaded the realms of the medical journal, and is spreading to an alarming degree. True, the journals do not sell soap or starch, but they sell advertising space; and, although they do not deal in candy and apples, they are, almost without exception, addicted to "taffy," and deal it out in hunks, more or less, according to circumstances. We mean—to be more explicit—that it has become an established custom, in accepting an advertisement, to give a "notice" of it in the editorial page, to "call attention" to it; and this custom has grown and spread until the "reading notice is not only expected, but is considered a matter of right. We plead guilty to the charge; we are given to giving "taffy" as "lagniape," like all the brethren of the medical press, and we do it *because it is the custom*. It has reached that stage where a journal dare not refuse to insert "reading notices" for his advertisers,—he will be reminded that all others do; and one cannot

well afford to be an exception to a general rule, especially if the loss of patronage be the consequence. Six years ago, when this *Journal* began its career, an advertiser, in sending "copy," would, perhaps, politely suggest that a little editorial notice would be acceptable,—some modestly do so now; a little later four notices a year was stipulated as part of the advertising contract; a little later we were told by several large advertisers that such notices "are worth more than the advertisement;" so—like a stone rolling down the hill, this custom has increased, until to-day the advertiser looks upon the "reading notices" as a part of his due; he pays you for a page, a half, or quarter page advertisement a year, or six or three months, and expects—some demand—a reading notice with every issue of the *Journal*, as "lagniape."

These "reading notices" consist for the most part of from two to three lines of commendation, to two and three pages of an elaborate article—written by some doctor, in which the merits of some proprietary medicine are brought to the reader's attention; consist of short (or long) letters to the proprietor, commendatory of his preparations; and as they are usually inserted in the journal to which they are sent, without alteration, that journal is made to appear as endorsing it, or it is taken, or mistaken, for the editorial utterances of the journal.

Well, like the little peach of the emerald hue, which brought so much grief and griping to "Johnny Jones and his sister Sue," it "grew and grew"—until it has attained to-day the proportions of a full grown and robust *nuisance*.

Many advertisers—our best patrons—send the *Journal* regularly, every month, articles taken from other journals, or written especially for the purpose, and very politely, it is true, ask that they be "inserted in the next issue of your esteemed journal;" and, for one, we always insert them.

It is not the advertiser's fault; who can blame them for taking all we will give—in the way of "lagniape?" It is our own fault. Publishers are themselves to blame for it; and if it continues to advance with the same speed and progress it has gained in the past two years, very soon there will be room in most of the smaller journals for—nothing else.

Why, sirs, to go through with the average journal, and then to fall upon two to five pages of "puffs"—for such they are—of nearly every article represented in the advertising page, or what is worse, to have one's reading interrupted every few pages, by such reading notices interspersed, reminds one of a circus and the side-shows;—in the midst of the performance, or just

after it is over, the voice of the side-show man swells on the breeze in melodious tones, and they vie the one with the other in sounding the praises of their several specialties, and in endeavoring to catch the attention of the passers-by.

Now, how is this to be remedied? All must see the injustice of it, not only to the publisher, but to the subscribers who pay for the journal. It is as unreasonable as to expect an accoucher who, having received a fee for a "delivery," is expected to visit the patient four to a dozen times afterwards, as "lagniape."

The Association of American Medical Editors will meet in St. Louis in October—for a special conference, it is announced. We have not been advised as to the special object of the conference, but we suggest that there is no subject connected with the medical publisher's business, which, in our judgment, demands more serious consideration than this very thing. Where is it to end? No one publisher likes to refuse a request of the kind from a prompt paying advertiser. We are all "clever fellows," and really like to be obliging—like to help make the "ads." pay, if we can—for the interest of the patron and publisher are mutual, to some extent; but it is not right to do so at the expense of our own interests, or to trespass on the rights of the paying subscriber. We lose subscribers by too much of this sort of business; and seriously, in our humble judgment, the time has arrived when a halt should be called.—*Daniels, Texas Medical Journal.*

The RECORDER has always refused "ads." when the conditions were that "pure reading" notices *must* be given. It has lost some business by this policy but, perhaps, gained in subscribers. By this course, also, its advertisers have the benefit of not being overcrowded. The best plan is to have a part of the journal set aside for such "notices" and have it paged with the advertising forms; such a department is honest to the reader. The habit of putting advertising insets throughout the body of the journal, as is so often done, is another most offensively vulgar practice. When a gentleman begins the perusal of an article, and, after turning a page or two, is confronted by a blaring "ad.," sandwiched in between the pages he feels like throwing the whole thing into the waste basket. Such vulgar intrusion is not only bad form but bad business policy, because while the "smart" advertiser certainly "catches the readers eye," it is only to excite his wrath and disgust.

Ranunculus bull. One of our most effective agents for the removal of bad effects from the abuse of intoxicating drinks.

A STRANGE CASE.

Translated for the HOMŒOPATHIC RECORDER.

Dr. Held, of Rome, presents the following in *L'Omiopatia in Italia*, 15th number, 1891: "It is a case of spinal irritation in a Polish lady. He visited the patient at the request of Dr. Brust, Homœopathic physician of Lemberg, under whose care she had been heretofore. The family occupied a small villa in a mountain village in Galicia. He was shown a pack of recipes by the most renowned professors of the universities of Vienna, Berlin, Heidelberg, and Würzburg. *Atropin*, *Belladonna*, *Hyoscyamus*, *Stramonium*, *Nux vom.*, *Strychnia*, *Argent. nitr.*, *Kalium* and *Natrum bromatum*, diverse aperient mineral waters, *Quinia* and *Valerianate of Zinc*, and many other remedies had been tried, indicating a nervous affection. On April 3, 1870, Dr. Held was conducted to the sick chamber. One side of the bed was protected with a mattress. In the bed lay a young lady of 17, blonde, emaciated, with palid face, blue eyes, with languid gaze, pale lips; her face expressed anxiety, a certain fear and lassitude. Her extremities trembled slightly. The clock struck eight. "Now, doctor," said the mother, "in five minutes the attack will commence." And, indeed, precisely at five minutes past eight the patient sat up in bed with a jerk, as if propelled by a steel spring, supporting herself on her hands, she raised her body about three inches, and with the rigid arms supporting the shoulders, she commenced a swinging motion with extended legs kept close together, at first slow, then faster and faster, until she touched the mattress which covered the wall on one side of the bed. Every five to seven minutes she would pause, then the arms would relax, she let herself fall on the bed, and took a deep breath, as if to regain strength. Yet, after two or three minutes, she would jerk up again and recommence the described motions and this *for one hour;* and so, that for precisely half an hour the velocity strength and extent of the motions increased, and the other half hour as gradually decreased, so that at 9:05 o'clock she would fall on the bed exhausted, sighing deeply, and then sleep for about half an hour.

On awakening she would obviously feel very much exhausted, but slowly would be dressed, and, supported on the shoulders of two servants, would drag herself to the adjacent dining-room, where she would partake of milk, bread and butter. Patient spoke with weak, scarce audible, voice, complained of great prostration of the whole body, her legs are unable to bear her, and feel as if made of cotton; they are paretic; with considerable effort

she can move and turn them in bed. After breakfast she passes her time sitting up, with reading, writing, or embroidery. About 12:30 P. M., she partakes of a Polish national soup made of carrots, bread, two soft-boiled eggs and butter, and some fruit, not too sweet. Her beverage is water mixed with very little Bordeaux wine. After this repast patient returns to bed to prepare, as she says, for the "minnetto." Precisely at 2:30 the same movements recommence, as in the morning, but the swinging is not as rapid, the feet not quite touching the suspended mattress. This attack lasts only half an hour, until precisely 3 o'clock. She then sleeps about an hour. She awakes less prostrated than in the morning, lets herself be dressed, and is brought out to the garden, where she is rolled about for a time in an invalid's perambulator. She is then left in the shade of a large tree, and passes her time until 6 reading and embroidering. At 6:20 she partakes of a supper consisting of milk, bread and butter or honey, fruit or marmalade. Towards 7 o'clock she is brought to bed again to await the third attack. It commences at precisely 8 o'clock, but in a different manner. Now, instead of the arms and hands the coccyx serves as support, forming a more or less obtuse angle. The rump is elevated about two-thirds of the vertical line, and the legs are extended, but not so close together as in the morning, the arms are extended rigidly sideways, and the fingers go continually through the motions of playing the piano; while the toes are continually in a jerking motion.

After 10 to 12 minutes relaxation of the extended muscles supervenes and the patient falls backward on the bed, but only to recommence the same motions after a pause of 10 minutes, and this continues until 10 o'clock. Then the patient drops asleep; this is tranquil for an hour but then broken by moanings and complaints, but only for a short time, when she sleeps again until morning. The number of swinging motions in the morning varies from 600 to 750, and those after dinner from 400 to 530. The mother of the patient kept an account of it. These daily pitiful exhibitions have lasted for six monts already. As to the case Dr. Held reports the following data:

Miss M. K., aged 17, is the daughter of a still herpetic father and a lymphatic mother. Has not been afflicted with any skin disease excepting the measles;—was frequently subject to catarrhal and rheumatic conditions. Having developed with the 15th year, she menstruated tolerably regular every 40 days, but not too copiously until four months ago. During catamenia has light pains in the pelvis, and more severe ones in the left ovary.

Constipated since childhood, she only has a passage every two or three days without discomfort. She had a cheerful disposition, and is very lively and mobile.

About 18 months before Dr. Held saw her she began to become nervous; her cheerfulness gradually subsided, she became taciturn. She was easily fatigued, complained of pains along the spine. These increased, especially on slight pressure; walking became tedious, insecure; she could not stand long, and experienced at times slight trembling in the rump and jactitation of muscles of arms and legs. To this was added headache, especially in the occiput and neck, sending rays down to the shoulder blades. Appetite was gradully lost. Soon after convulsive movements occurred in the extremities several times daily, and sleep became disturbed and interrupted. She gradually lost her blooming looks, became pale, muscles relaxed and her strength decreased. Menstruation occurred but rarely. Then it was that the celebrities of the Universities of Vienna, Heidelburg, Würzburg and lastly Berlin, were consulted, and in addition to the remedies already mentioned electricity was applied. But all without avail, for despite these heroic measures her condition became worse, so that by January, 1870, above described condition became established. In April Homœopathy was appealed to, and Dr. Brust, of Lemberg, declaring the case one of Chorea magna, took her in charge. He used antipsorics, as *Sulphur*, *Belladonna*, *Silicia*, *Psoricum*, also *Gelsemium*, *Pulsat.*, *Nux.* and *Ignatia*, etc., but the sickness steadily progressed, and finally the weakness in the limbs assumed a paretic character.

Status praeseus: Paleness of the skin of the face, lips and gums; deficient warmth, especially in the lower extremities; pulse 80, the tongue small, yellowish, taste often bitter, not much thirst, infrequent stools, total aversion to meat, the smell of which even occasions nausea, also aversion to sweets. Menstruation ceased. Between the shoulder blades there is drawing pain; in the lumbar region a pressing pain. The whole spinal column is sensitive to even light pressure, especially at the lower vertebræ of the neck; if a stronger pressure is brought to bear convulsive movements are manifested in both arms. Spinal vertebræ painful, especially the second, third, fifth, seventh, ninth and eleventh; the loin or sacrum also painful, as well as all the ribs and intercostal muscles. Also the liver and spleen give pain on pressure and are somewhat swollen. Slight pressure on the stomach occasions nausea, and pressure on the left ovary is painful. Sitting upright without support is irritating and very fatiguing.

The upper extremities seem to have sufficient strength; not so the lower. She can lift the legs for the purpose of adduction; she can move them sideways and extend them; but she evinces great difficulty in raising herself up without assistance; the legs don't support the body, they are as if made of cotton. There exists an extraordinary irritability to noise of any kind, more especially to thunder; and in these mountainous region thunder-storms are of frequent occurrence in summer.

Dr. Held diagnosed the case as spinal irritation, caused by a chronic spinal meningitis, and came to the conclusion, with the attending physician, to administer a dose of *Silicia* 200 in the morning, and during the day *Cuprum met.* 30 for 20 days, to await for the effect; and then to change the medicine, if called for. Not until November did the mother report that these remedies occasioned a slight but transient amelioration; and as by the end of December another remedy prescribed by Dr. Brust brought no change, she desired that Dr. Held should assume charge of the case, which, being fairly overwhelmed by letters from the family, the doctor finally consented to do. Then it came back to his memory that the late Dr. Wahle once told him, while speaking of remedies but seldom used: "Whenever you have a spinal affection in hand, where symptoms recur at a certain hour, then give with closed eyes (without second thought) *Rana bufo*, but give the preparation that my father made, and you will be surprised at the brilliant result." In remembrance of the counsel of so deep a thinker, Dr. Held sent the patient a small vial of *Rana bufo* 6, and one of the 15th potency, with the direction to dissolve 10 pellets in an ordinary glass full of distilled water, and to take three swallows of this a day. On January 30th she commenced, and took this remedy for eight days, then paused for six days, and then took the 15th potency in the same way for eight days, then paused for six days, and then reported.

A report from March 6 related that on February 19th, *i. e.*, at the time the taking of *Rufo* 15 was ended, the evening attack did not appear. On February 25th, the attack that always commenced at 2 P. M. ceased, and on February 27th, she gave (without orders) *Bufo* 6 for 4 days; this was followed on March 1st by slight contractions of the arms and legs for ten minutes. On March 2d the morning attack ceased; this had been growing perceptibly weaker for several days, and from March 3d the patient was free from all attacks, and then the remedy was stopped, the more so as the last dose of *Bufo* 6, occasioned palpitation of the heart, and disturbed her night's rest Her spirits rose, and

the general condition was satisfactory. Only the anæmia and the paresis had now to be overcome.

On April 1st I ordered *Natrum mur.* 30, morning and evening, 5 pellets in water, to be taken for 10 days, then pause. Towards end of April somewhat better; *Natr. mur.* 30, repeated, but only one dose in the evening for eight days, then *Sacch. Lac.*, all through May. By the end of that month everything was much better except the paresis. Appetite was good, patient liked meat. The pallor of the face gave way to a healthy complexion; gums and lips had more color. Menstruation had reappeared, though scanty. *Plumbum met.* 30 had a favorable effect on the paresis, so that patient could sustain herself on the legs for a few minutes without assistance; but locomotion was impossible. In August she used for three weeks the bog-baths of "Marienbad" with good success. She could walk at first with two canes, afterwards with one. Menstruation appeared same as before the attack; she was cured. She made an extended travelling tour with her mother, returned to Krakow on October 1st, and attended a wedding about the middle of the month, at which, as well as on later occasions, she danced as blithely as any of the rest—much to the astonishment of all Krakow.

It gave us a good deal of satisfaction to reproduce this interesting case *in extenso*. It shows, as Dr. Held is fully justified in maintaining, the vast superiority of the Homœopathic over old-school treatment. And it reminds each one of us never to despair even in the seeming most hopeless cases.—*Allgem. Hom. Zeitung, July, 1891.*

SABAL SERRULATA.

By Will S. Mullins, M. D.

There has come to us Homœopaths within the last few years a remedy, the need and lack of which has left many a suffering man, and many a girl or woman, feeling "quite blue." The man because his prostate gland was too large, the girl or woman because her mammary glands were too small. The tincture of saw palmetto berries certainly fills a "long felt want."

Eighteen months ago, I commenced a series of clinical experimentation with the tincture of the berries, and with no specific indications or characteristic symptoms except the following broad pharmaceutical one: "It has special action upon the glands of the reproductive organs, tending to increase their activity, to

promote their secreting power, and add greatly to their size." Instantly the thought flashed through my mind of the great number of enlarged prostates in our city, of the greater number of women yearning and wishing and praying for larger breasts. I also knew that the ones with the enlarged prostate, the ones with small mammary glands, would gladly avail themselves of anything to decrease the one and add a charm of increased size and beauty, of velvety, downy softness to the others.

The first time in my life, and for purely scientific research, I went fishing for patients.

I found all I wanted, and the results obtained enable me to say, I am glad God brought into life and growth saw palmetto berries; yea, more, many men and several women are gladder still.

An old man, aged seventy-eight years, says that for last twenty years has had an enlarged prostate: despite all old and new school medication, that gland grew and flourished until his urine —from the glandular encroachment—had to be drawn with a catheter twice per day. Throbbing and pain in the prostatic gland extended to the testicles. Examination found the prostate as large as a small egg.

℞. Tinct. of Saw Palmetto . . . . . ℥ ss.
Aquæ destillata. . . . . ℥ iv.
M. Sig. One teaspoonful every two hours.

Within three days could pass some water night and morning, but failed to completely empty bladder.

Same prescription continued ten days, after which, with some straining, could do away with the catheter. Pain and throbbing in perineal region lessened. The prostate decidedly decreased.

Thirty days from time began remedy, micturition, three times per diem, slight straining. Examination revealed the gland reduced one-third. Took the remedy in much smaller doses for three months; prostate reduced over one-half.

Y., aged thirty-four came to me from an old-school M. D., after eighteen months of heroic treatment, mingled at times with damnable torture, having through their wise (?) and scientific (?) course of treatment already parted with one testicle.

Symptoms: Constant throbbing pain and tenderness in prostate gland, dull aching; at times, sharp cutting pains, extending to the right and only testicle. Epididymitis orchitis.

Pain on micturition, passes prostatic juice at every stool and when making water. Mucus at times, also a yellowish watery discharge from urethra; pulse, 96; temperature, 102.

Treatment as follows: Strapping the scrotum. Internally,

Aconite and *Clematis*. Called next day and found pulse 80, temperature, 100. Prescribed *Puls.* 30 and *Clematis* 6. Examination revealed enlarged prostrate as a source of all his trouble. Was able to come to the office the next day. Prescribed the palmetto tincture, ten drops every two hours. After three weeks' use there was a decrease in the size of gland over one-half. Has now been under the same medication two months and a half. Neither mucus nor prostatic juice passes. Has gained twenty pounds in weight. Gland as near normal as is generally found in men who have been married a dozen or more years. Now taking saw palmetto, five drops, twice per diem.

Mr. Y., aged fifty-three, complains of some throbbing and tenderness in the region of the prostate gland; sexual weakness, erections too weak, and very little thrill.

Prescribed *Sabul serrulata* tincture, one dram in three ounces of water; M. Sig. two teaspoonfuls four times per day. After three weeks' medication, reported himself well.

Miss N., well-formed, consults me as to some way to enlarge her breasts. Prescribed saw palmetto tincture, five drops four times per day. Has now been under medication three months, with an apparent and satisfactory, yet slow increase in size of mammary glands.

Dr. P. Thompson, of this city, president of our State Board of Health, at my suggestion, prescribed saw palmetto for an old man of fifty-three with an enlarged prostate, and weakened sexual vitality. Not being a Homœopathist, he gave it in dram doses, four times per day.

Reports decided increase in glandular enlargement, and renewed sexual activity.

He also tells me he has been giving it to an old lady over sixty years of age, who has suffered for years with a bronchial cough, and with a decided improvement in her condition.

Have treated several other cases of prostatic troubles with just as satisfactory results.

Now, one must certainly conclude that in the *Sabal serrulata* we have a grand and precious remedy, specifically affecting the organs of generation in male and female.

Its indications, gathered from a clinical standpoint, are, in the male, enlarged prostate with throbbing, aching, dull pains; discharge of prostate juice; at times, discharge of mucus; also a yellowish, watery fluid, weakened sexual power, loss of thrill, orchialgia, and epididymitis orchitis, when associated with an enlarged prostate.

In women, weakened sexual activity, ovarian enlargement,

with tenderness and dull, aching pains; small, undeveloped mammary glands.

Also indicated in chronic bronchitis, with a wheezing, hard cough, worse on lying down and until 6 A. M.; worse in damp, cool, cloudy weather.

I trust these clinical facts will cause a further investigation of this precious remedy, which has already proved in my hands to be fraught with certain specific powers. It will certainly add more richness to what is already, to every true Homœopath, our precious materia medica.—*American Homœopathist.*

Henderson, Ky., July 27, 1891.

SUCCUS CALENDULÆ.

PENDLETON, ORE., Sept. 18, 1891.

I am using the Succus Calendulæ in spray, 25 per cent. sol., and on dressings to everything "*raw*" which comes in my way, and it is healing everything I am using it on. I never have seen anything equal to it. It stimulates granulation when wanting and modifies the same when too prolific, and is in every way an ideal local application.

Yours very truly,

H. S. GARFIELD.

To Messrs. Boericke & Tafel, No. 36 E. Madison St., Chicago, Ill.

CLINICAL CASES FROM FOREIGN JOURNALS.

Translated for the HOMŒOPATHIC RECORDER.

ANTIPYRIN—SYMPTOM. Mrs. K., of full-bodied, phlegmatic habit, was troubled every time she took *Antipyrine*, with a rather large vesicle on her lip, from which she suffered acute pain. But seldom will such a regularly recurring symptom be observed, and it certainly deserves particular notes as of clinical Homœopathic value. This remedy would seem to be related to *Rhus*, *Croton*, and especially to *Condurango*, although the last has flat ulcerations with rhagades in the corners of the lips.—*Dr. S. in L. P. F. fur Hom. for Oct. 1, 1891.*

***

GRAPHITES.—An elderly gentleman of spare habit, cachetic look, with complexion such as is seen in cases of carcinoma of the stomach, but withal bright and talkative, without any

difficulty of respiration, consulted me because of a pressing, stitching, boring pain in the region of the navel, also extending to the hypochondres and the small of the back. This pain prevented falling asleep until late in the night. This chronic ailment had decidedly increased during the last four or five weeks, and is accompanied by habitual costiveness.

In the morning patient feels best, while in the evening a decided aggravation sets in. At times a certain faintness was experienced which assisted in determining the remedy; for *Graphites*, is often indicated in anæmic conditions, such as paleness of face, decrepitude, etc., which explains its usefulness in convalescence from severe sickness, if accompanied by an annoying costiveness. *Nux vom.*, very useful in such cases proved of no effect, but *Carbs veg.*, ameliorated, and just this circumstance drew my attention to the mineral coal, *Graphites*, so effective in Homœopathic hands. Within eight days a great improvement was effected. Particularly grateful seemed to be a slight secretion of mucus, which seemed to come from the stomach, and which was expectorated without difficulty. The evening aggravation has ceased, and the tongue, until then rather dry and of a yellowish color in the middle, is now clean with a natural degree of moisture.—*Dr. Foullon.*

***

TYPHLITIS STERCORALIS RHEUMATICA.—On May 30th, I was consulted by the proprietor of a flour mill, who complained of pains in the abdomen, without being able to locate them. The tongue was coated, with loss of appetite, and the man looked quite sick. The cause was a cold contracted during an evening walk. I gave *Bryonia* 1x, a dose, in water, every three hours. Very early next morning a messenger called me to the neighboring village, the patient being much worse, pains having prevented sleep all night. On examination, I found the corpus delicti in a rather hard swelling in the right side, which seemed to consist of a fœcal impact, the usual accompaniment of an inflammation of the cæcum. The swelling was circumscribed, and of a uniform hard surface, not knotty. As I could not detect any error in diet, I was forced to declare it a case of rheumatic catarrhal typhlitis. There was no meteorismus, but patient was very restless and sleepless on account of pain, and could not take the least food without aggravating to intensity the abdominal pains. Even the harmless cocoa-shell tea made aggravations, as well as a drink of water. Prescribed *Bryonia* 6, and as patient had undoubtedly grown worse during the protracted ride in the cars and on a wagon while going home from my office the pre-

vious day, and as a cold was the primary cause, I prescribed *Aconite* 6 in addition to the *Bryonia*, and also gave patient in case he evinced a desire, thin farina gruel in water. I also ordered a warm cataplasma of bran over the swelling, and patient was directed to rub in some warmed poppy seed oil.

By the next day a decided amelioration was noticeable: the swelling was about the same, but he had slept an hour at a time, liquid food was tolerated better, and a copious perspiration had followed the exhibition of *Aconite*. Constipation existed since twenty-four hours, but he did not seem to be inconvenienced thereby, and as I had every confidence in the efficacy of *Bryonia*, which was still administered right along, I abstained from interfering with the usually so hastily administered clysters of soap-water. *Belladonna* was now substituted for *Aconite*. Patient sends a report, written by himself next day, that the painful induration seemed to diminish under the embrocation with the oil; it is smaller and softer, doesn't pain as much, on lying quite still; feels no pain now only on moving or rubbing in the oil; some discomfort is occasioned by incarcerated flatus, which, in fact, was the chief complaint of patient from the start. The letter closes with: "Sleep was good, have had no passage since Wednesday (two days); true, I ate very little. Whenever I eat or drink it still occasions discomfort. I have a good appetite." *Bryonia* is continued alone at longer intervals, inunction with oil is dispensed with; he still gets no clyster, I allow him to eat some cooked prunes (without their skins), and to drink the juice, but still strictly prohibit all solid food. On June 4th he reports that he had a voluntary passage on that and the preceding day; pains have ceased; was up several hours each day, but still feels very weak. As it may safely be stated that with returning voluntary stools, convalescence is established in cases of Typhlitis, it will be seen that this serious case was brought to a favorable resolution in from four to five days. In this case, under the continued use of *Bryonia*, copious spontaneous evacuations were brought about, the induration vanished, and merely left a sensation "as if something had become shortened" at that point, as I was informed later.—*Dr. H. Goullon, Jr., in Pop. Hom. Zeitung, Vol. IX., No. 1.*

***

SILICEA IN CANCER.—Among other things I found in a manual on Pharmacology by Schroff a remark, in speaking of *Natr. silic.*, that the late Prof. Schuh, one of the most prominent surgical authorities in Vienna, had recommended *Silicea* in cancer. I am in a position to furnish some precise information on the subject.

A number of years ago I treated a patient who had two scirrhous, highly painful nodules in her left mamma, on which I seemed to be unable to make a favorable impression. Finally the patient yielded to the entreaties of her relatives to consent to an operation, provided I would go with her and be present during the operation. Her wishes were complied with, and I proceeded with her to Vienna. At my instigation Prof. Schuh was called, who on examination declared his willingness to perform the operation. He preferred, however, not to be required to give an anæsthetic, as in his opinion without it a favorable result could more readily be promised. This entirely coincided with my views, and on the succeeding day the operation was performed in a masterly manner in thirteen minutes. On taking leave he requested my company, as he had an interesting communication to make alike important to me and the patient. During our walk he related the following, which I will endeavor to give in his own words: "Three years ago I was called to see Prince S., whom I found afflicted with cancer. The success was, frankly stated, unsatisfatory, though I did everything known in surgery for his alleviation during the succeeding two months. One day the Prince expressed a desire to give the much praised Homœopathy a trial, and that therefore he would like to interrupt my treatment. Accordingly Dr. Fleischmann was called, prescribed for the Prince, and what I casually heard a few weeks after, spoke much in favor of Homœopathy. A few weeks later I met Dr. F. on the street, accosted him, and asked how the Prince fared. And much to my astonishment he stated that within three weeks of the change of treatment the case assumed a totally different, even benignant, phase and that the Prince could be classed as convalescent. I was informed that the only remedy administered had been *Silicea*. I was firmly resolved to give this remedy a trial in similar cases; and though I could not get myself to use such infinitesimal doses I yet had *Silicea* triturated with sugar of milk in the proportion of one grain to 100, and, in my experiments, gave a few grains morning and evening. The first case that presented itself was the wife of a high civil dignitary, whom I had operated upon for the second time a few weeks before, and all indications tended to show that the malignant nature of her case was as virulent as ever. After a two weeks' use of *Silicea* the appearance of the wound was much improved, and in three weeks more the wound had closed and the patient remained cured. Since that time I have used this remedy in scirrhous cases, sometimes after the operations, sometimes when it seemed yet in time, even without an operation, and I must confess the success

was, as a rule, very gratifying; and now I request you to give this remedy in the same strength, and prepared by the same druggist, to your patient." And so I did exactly according to his directions. After a six weeks use of the *Silicea* the very considerable wound was entirely healed, and to-day, after more than twenty years, it has not reopened.—*Dr. Hirsch, of Prague, in Pop. Hom. Zeitung, Vol. IX., No. 4.*

***

HÆMORRHOIDS.—Mrs. R., æt. 25, of gracile constitution, but otherwise perfectly healthy, was troubled with mucous hemorrhoids, and, especially since about a year, to such an extent that after sitting for some time her underclothing was fairly saturated. The copious secretion was mucous, similar to white of an egg, stiffening the clothing. *Carbo. veg.* 15th brought, after a few days, considerable amelioration, which, however, lasted but a short time; the same was the case with *Carbo veg.* 3. Finally I administered *Antimon. crud.* 6, which on the third day already perceptibly diminished the flow, and the continued use of which, mornings and evenings, brought about a perfect cure within three weeks.—*In P. H. Z.*

***

HERPES.—Anna B., waiting maid, was troubled since several months with an herpetic eruption in the form of dark red spots, with a rough surface, on the left side of the neck, and later also on the left arm, on the back and on the right thigh. The form of the spots was mostly oval and some of the largest had attained the size of an egg. Only at rare intervals was she troubled with itching, her general condition being good. *Graphites* 2d trit., a few grains morning and evening, caused the herpes to become pale; they ceased to itch, and at the end of the third week the cure was complete.—*In P. H. Z.*

***

KALI BICHROMICUM.—Mr. U., a rare specimen of extreme obesity, who could with eclat have passed as the fat man in any museum, was afflicted with a chronic accumulation of phlegm, seemed fairly to be filled up with it, especially in the mornings. The usual domestic remedies, also all kind of mineral waters, were of no avail. I concluded that not much could be done for him. Evidently all internal organs had more or less of a fatty degeneration, which, in fact, was fat to whoever saw this formless colossal body. However, I prescribed a low trit. of *Kali bichr.* (2x) and ordered him to take a few grains in hot water every evening. Within about two weeks patient was able to resume his walks, extolling to the sky that wonderful powder.

His most sanguine expectations (and mine) have been exceeded; he feels easy on the chest and the chronic accumulation of phlegm is scarcely perceptible. He furthermore praised the effect of the remedy on his stool, as it materially aided in giving relief (which was neither intended nor anticipated).—*Dr. Goullon, Jr., in P. H. Z.*

***

SULPHUR IN AMAUROSIS.—With *Sulphur* 3 dil., in three or four daily doses of three drops each, I have been able to arrest the progress of amaurosis (gray) in over twenty cases within the last six years. Not once was I disappointed in its beneficent effect, it having always been able to prevent blindness. The remedy must be continued a long time, however, for two years or more.—*Dr. Hamp, in P. H. Z.*

***

RHUS TOX 6 IN CHRONIC DIARRHŒA, painless, only in the morning, preceded by marked commotion in the bowels, will seldom be found wanting. The symptoms, as seen in Hahn. M. M. P., justify this selection of the remedy. Patient is driven out of bed in the morning, as he cannot retain stool.—*Dr. Lorbacher, in P. H. Z.*

***

NUPHAR LUTEUM 3 cured a chronic diarrhœa following an attack of dysentery. Stools were liquid, yellowish, excoriating the anus and debilitating the patient very much.—*Dr. P. L. Gage.*

***

ACUTE ARTICULAR RHEUMATISM, and *Benzoic Acid.*—A long and successful experience with this remedy prompts me to write this article. About twenty years ago I carefully studied *Benzoic Acid* in Hering's American provings, and shortly after was called to the bedside of a poor man, who seemed to present a true picture of the symptoms. His right shoulder and left knee presented a shining swelling, which would not tolerate the least touch, and this had lasted for three days already. I gave him *Benzoic Acid* 6x trit. a few grains every few hours, and within another two days he was entirely relieved of his pains and swelling; but he suffered from a catarrh, which I took to be a side effect of the remedy. A little later, in the same spring, I had two more patients with acute rheumatism, somewhat less similar to the picture of the proving, yet I gave them *Benzoic Acid*, and in eleven days both were cured. About the same time I had a very interesting case, a young farmer's wife, whom I had delivered with the forceps, of her first baby. While still lying in, she was afflicted with *Phlegmasia alba doleus.* Her left thigh swelled

up immensly and was very painful. I tried all Homœopathic, and after a while also, old-school remedies, yet to no purpose, inwardly and external. The most noticeable theory was that several times the swelling was almost entirely gone, when all at once the right leg began to swell, and if that decreased, then the left leg would begin to swell again and so several times in succession. Finally, this changing about, which eventually also implicated the shoulders and arms, even to the finger tips, induced me to try *Benzoic Acid*, and from that time on convalescence set in, and soon the wandering of the swelling stopped, and patient recovered..

Since then I have administered in most cases of articular rheumatism *Benzoic Acid*, without further thought and, as a rule, effected a cure in from ten to fourteen days. The pains diminish from the first day, even though the wandering from joint to joint will persist to the last. I have not met again with such striking success as the one mentioned first, but, as a rule, I succeed in cutting short the attack, if that remedy be given right from the start. I was, therefore, never tempted to use *Salycilic Acid* preparations. Both substances are closely related, *Salycilic Acid* differing from *Benzoic Acid* in containing somewhat more oxygen. In using the latter you are always secured against the disagreeable complications apt to accompany the use of *Salycilic Acid*, which is quite a consideration.

My usual dose is 15 to 20 grains of the 6x trit. of *Benzoic Acid* dissolved in a tumbler full of water, a tablespoonful for a dose every two hours. The use of potencies higher than the 6x was not satisfactory.—*Dr. Ad. Simon in Pop. Hom. Zeitung.*

***

CASE OF GOUT.—A gentleman, æt. nearly 80, has been troubled at times with gout. At times it attacked the foot, at another time the stomach and again, the head. In every instance *Calcarea carb.* 30 gave speedy relief. The headache in the last attack was so overwhelming that patient was fairly despairing, and for a while refused to take medicine; when finally he was prevailed upon to take a dose he was soon relieved. The effect of this remedy was so striking that I will give the symptoms in full: The tongue of this patient during the attacks had a dirty greenish coating, feet were very apt to become cold and sometimes œdematous; but most remarkable was his pulse, which would run down to 28 per minute. Whether certain hallucinations which troubled the old man at times had a causal relation to the gout I am unable to tell. What troubled him oftenest was an ivy plant the inordinate growth of which discomforted him and kept him from going to sleep. This morbid activity of

the brain was regularly allayed by a dose of *Valeriana*.—*Dr. Goullon, Jr., in P. H. Z.*

***

GRAPHITES, A PECULIAR EFFECT OF.—Miss K., æt. 19, very tall, rapid growth, slender and anæmic, complains of a certain peculiar symptom, that of salivation. It may set in at any time, irrespective of meals. May come on just before sitting down to dinner. This peculiar affection of the pancreas prevents her seeing company and makes her low-spirited. While we have a very good remedy for this symptom in *Bismuth. subnitr.* a second peculiarity of the patient prompted me to prescribe *Graphites*, and this was habitual costiveness. Accordingly *Graphites* 12th, four drops in half a wineglass of water, was given, a teaspoonful three times a day. After the first spoonful a decided aggravation set in, and after this the whole trouble ceased. A peculiarity seemed to be that the trouble occurred oftenest while out *riding* in a carriage, less so while riding on a railroad.—*Dr. Goullon, L. P. Z. f. H., Vol. XXII., No. 11.*

***

SPECIFIC ACTION OP THUJA OCCIDENTALIS.—Many a time children are brought to me with a severe inflammation of one or both eyes, and as cause and only reason vaccination was given. The little patients had been vaccinated, and since then the eyes would become inflamed and go on from bad to worse. For weeks and months these attacks would persist, seemingly utterly unimpressed by medicine. Even Homœopathic treatment is generally not so prompt as we are used to witness, inasmuch as remedies like *Calcar. c.*, *Calc. jod.*, *Hepar s. c.*, *Sulphur*, the *Mercuries*, *Arsenic*, *Nitric acid*, etc., do not seem to take hold properly; and right here let me draw your attention to the often insufficiently appreciated remedial action of *Thuja*. To Dr. Kunkel, of Kiel, belongs the merit of having first discovered the curative properties of *Thuja* in almost all afflictions following vaccination. This merit is the greater, as obligatory vaccination is now demanded in all larger cities of children attending public schools, and the ravages of vaccinosis (as I term the thence resulting afflictions) can be but too thoroughly studied on the rising generation. The eye seems to be the most frequently attacked organ of the body. A remarkable fact in this connection is that *Thuja* is also the specificum for all the horrid phases of sycosis. The inflammation of the eyes following vaccination does not differ materially from common scrofulous ophthalmia. In either of them we find the same sensitiveness to light, lachrymation and mucous purulent secretion, *i. e.*, agglutination with pustules in

the cornea and subsequent opacity of the same. If *Thuja* is administered, one dose should be given in the 30 potency (I generally give the 100th); give it plenty of time to expend its action. After this *Acidum nitric* 6, often follows well if the eyeball and conjunctiva is still engorged with blood. Dr. Kunkel teaches that *Thuja*, when it takes hold, produces a remarkable change in general appearance in at latest eight days. The last little patient to whom I administered it showed within a week a decided improvement in his looks, the photophobia had vanished, and secretion and redness was considerably lessened.—*Dr. Goullon, Jr., in L. P. Z. f. Hom.*

***

APHTHÆ IN NEW-BORN CHILDREN.—Dr. Baum, Director of the Midwife Institute, in Appeln, published an interesting article on the above subject in the *Allg. Medecin. Central Zeitung*. Suspecting that "Bednar's Aphthæ" were due to mischievous interference on behalf of midwives in cleaning the mouths of the newborn, he set aside forty babes and had their little mouths carefully and thoroughly cleaned directly after birth and after every meal, and of these only eight were spared of these affections of the mouth. Thirty-two (80 per cent.) showed the characteristic ulcerations on the gums, of which thirty had the true Bednar aphthæ. Almost in all cases these sores formed within the first two days. In two cases they were observed within two hours after birth and before they were applied to the breast, thus showing conclusively that sucking could not be their cause, as so many maintain.

He then set fifty babes apart, on which he strictly prohibited any interference in the way of cleaning the mouth by the attendants. The result was a *surprise*, *for not one* of these had anything the matter with their gums. In view of these facts the learned author deprecates any interference with nature, excepting in cases of impending asphyxiation on account of accumula- of inordinate quantities of slime right after birth.

In conclusion, he mentions that among one hundred and twenty new-borns, observed later, only one had aphthæ, and in this case the nurse surreptitiously disobeyed his injuction and had cleansed the mouth of her charge.—*Allgemeine Hom. Zeitung, October 1st, 1891.*

***

A REMARKABLE CURE BY GRAPHITES.—Miss S., age 15, healthy appearance, pretty large and built in proportion, has a violent headache in right temple *every four* weeks; the pain is stinging. Glittering before the eyes frequently precedes and suc-

ceeds the attack. The headache is by the hour, but also at times the following day. On contemporaneous drowsiness a deep sleep obtains, and heat and redness of the head is followed by chill. On the 24th of April she received *Sepia* 6. After two weeks I learned that the headache had ceased, but that the troublesome glitter before the eyes remained. Beside the lassitude it was particularly the heaviness of the eyelids that determined me to prescribe *Graphites* (*Graphites* even cures *Ptosis*, the involuntary dropping of the lids) outside of the fact that, though well developed, she as yet had no menstruations, and finally had a degree of hoarseness that indicated chronic hypertrophy of the tonsils. (A. Vogel claims this to be a sign of scrofula derived from syphilis.) On the 8th of May she received *Graph*. 2, trit., 2 grs., six mornings successively, and on the 15th of May expressed her joy that this headache, ever certain to occur after four weeks' interval, had not only been completely cured, but that the sensation of lights before the eyes had completely disappeared.

***

SILICEA AFTER VACCINATION.—Prof. Redman Coxe was one of the first to introduce vaccination in America. He and President Jefferson had all their grandchildren vaccinated regularly. With one of the grandchildren it did not take, even after repeated operations. Whenever there was a small-pox epidemic, the old gentleman would come with his grandchildren to have them vaccinated. After the last vaccination one had fever, followed by convulsions, no pustules. As I (Dr. C. Hering, of Philadelphia), was the family physician, I was called to attend the case. The usual remedies were unsuccessful. After a careful examination and close comparisons in ths materia medica, I gave *Silicia* 30, which cured the case. This fact caused Redman Coxe to study Homœopathy, and he later became a Professor in the Homœopathic College of Pennsylvania. Several years later I was called as consulting physician in the case of a boy of ten or twelve years attacked by convulsions; a certain similarity of symptoms with the above-mentioned case caused me to ask if the child had recently been vaccinated. I was told "yes, but without success." I prescribed *Silicia* 30, and to the astonishment of the Homœopathic physicians in attendance there was immediate improvement, followed by a complete cure. Since then I have used *Silicia* for the bad effects of vaccination, where another remedy was not distinctly indicated, or where the seemingly indicated remedies did not act, and also to finish a cure.

P. S.—For more than twenty-five years, Dr. Hering in this

way successfully employed *Silicia*, and still it is not properly appreciated by the profession in general. Of course Dr. Hering used generally one dose of a high potency and rarely repeated it, and claimed to have had more success than with the potencies below the 30.—*Dr. Bruckner.*

THE SINGLE REMEDY IN DISEASE.

By Sam. Philip Alexander, M. D., C. M., M. R. C. S.

Read before the Western Counties Therapeutical Society, England.

The point for discussion under this heading, I take it, is the use of the single remedy as against the practice of giving drugs in alternation. We all agree, I have no doubt, that for the proper application of the law of similars the use of the single remedy is one of the great essentials. In my own practice I find it sufficient for the bulk of cases to prescribe one remedy at a time, and only to change it for another, as indicated by the varying symptoms and stages in a given disease. Of course, in some cases—"chronics" especially—the properly chosen single remedy will often cure straight away, or eventually, if the remedy is persisted in, without having occasion to change. I can recall many instances in support of this. I have been especially struck lately in comparing two cures I have had; one an acute case and the other chronic, but both treated with the same drug. The acute case was one of violent headache, attended with maniacal symptoms and melancholia, the totality of the symptoms pointing to *Calc. carb.* The other case was a baby of about a year old, who had suffered from birth with diarrhœa and vomiting, perspiration of the head, mesenteric enlargement, and all the usual symptoms and signs of marasmus. In the first case *Calc. carb.* 6 cured in a week, whilst the same drug in the same potency made a man of the baby (so to speak) in six months.

I find it a very good rule, where the indicated remedy fails to benefit, to first try a different potency before changing the drug, in acute cases going, as a rule, lower; in chronic, higher. A few days ago I was consulted by a young girl suffering from an acute attack of herpes zoster of the upper part of back and left side. The eruption consisted of a mass of vesicles from the size of a pin's head to that of a pea, and was accompanied by a neuralgic pain. *Rhus tox.* 3 was prescribed and taken with little effect for three days. I then changed to *Rhus tox.* 1x, when the eruption dried up forthwith, *Arsenicum* 3x completing the cure by remov-

ing the pain. As to high potencies, I can never forget a case I used to attend when in Yorkshire.

The patient, a lady, was a chronic sufferer from strumous disease, which manifested itself in almost every conceivable form, more especially as severe double ophthalmia. A symptom peculiarly distressing to her, and from which she frequently suffered, was a "feeling of grit or sand under the eyelids." *Sulphur* 30 always promptly removed this feeling, any lower potency of the drug being entirely without effect.

And now as to alternation of remedies. Whilst strougly deprecating the method, as a rule of practice, I cannot help thinking that in some cases—acute especially—we can do more for our patient with two drugs given alternately, than by the single remedy. *Belladonna*, though pretty well specific for scarlatina, does not appear to me to reduce the fever so quickly given alone as when alternated with *Aconite*. This applies, too, to other acute diseases attended by fever, such as pneumonia, pleurisy, bronchitis, etc., in which *Aconite* given during the pyretic stage seems to help the action of the more specific remedy.

Again we frequently have to treat a mass of symptoms, which, it is almost impossible to hit off with one drug, or two distinct sets of symptoms occurring simultaneously in the same patient. How frequently, when treating a case of eczema or any other definite disease, are we requested by the patient to prescribe something at the same time for his "poor stomach," or liver, or to "put something into the medicine for the bowels," or to help the sleep? In such a case, I expect the most of us would order with success some such drug as *lycopodium*, *caffein*, etc., to be taken at bedtime? This is really to alternate, and yet to do so does not, as a rule, interfere with the action of the specific remedy. The ideal practice, no doubt, is to embrace such side issues and additional complaints in the totality of the symptoms, and with the single remedy fire a shot at the whole. How many of us manage to hit, I wonder?

The stock treatment of piles with *Nux* and *Sulphur*, adopted by some, certainly seems to do more good than the employment of either of those drugs singly.

Then there are cases, in which we may have descended to alternation, where I am confident the second drug, if it does not actually assist the action of the proper remedy, does not interfere with it, but acts like so much additional water. I have seen a case of acute rheumatism promptly cured—*Mirabile dictu!*—with *Bryonia* and *Rhus. tox.* given alternately! (I would just remark that *I* had no hand in this prescription.) That two such antag-

onistic drugs, thrown into the system together, should effect a cure is only to be explained on the principle of the "survival of the fittest;" the disease selects its own *Simillimum*, and discards everything else. But the great argument against alternation, and one which should teach us to steer clear of the practice as much as possible, is the obscurity in which it involves us as to the proper estimation of our results. I can recall at least two cures in my own practice, following upon the alternation of drugs, in which to this day, I am ignorant as to which drug to apportion the credit. One was a case of chronic gastro-enteritis, the principal symptoms being vomiting and diarrhœa after food, with burning pain in the stomach and severe colic. These symptoms seemed to me to indicate *Arsenicum* and *Colocynth*. Accordingly the two drugs were given in alternation, and the man who had suffered for months was well in a few days. Whether one or both drugs did the work, I cannot tell.

The second case was somewhat similar, occurring not long ago in a lady, whom I was called to see in the country. This case, however, was recent and typhoid in character, attended with liver symptoms. *Baptisia* doing no good, I hesitated between *Merc. sol.* and *Verat. alb.*, but finally gave the two in alternation, with immediate and complete success. Possibly the two drugs helped in the cure by each removing their own peculiar symptoms, but as they were given in alternation I could never know certainly.

I quote these cases, not to defend alternation of drugs, but to show how instructive a study of the practice may become, as contrasted with the more precise and better way—"the single remedy."

AMMON. MUR. IN INFANTILE DIARRHŒA.

In the later stages of a prolonged case of diarrhœa, depending on a neglected indigestion in a child, probably accompanied by ulceration of the bowels, the following symptoms were present:

Fever: Passages frequent, green, watery, pain before, very foul smelling, somewhat brassy in odor, most frequent in morning. Colic and motion of flatus in bowels continuously. Loss of appetite. Worse in morning. Face somewhat bloated. (Child naturally fat and rather sluggish.) Face with a bright, sharply circumscribed rose-pink flush on *each cheek* and on *chin*. Much tenesmus.

I gave *Ammon mur.*, very low, making the dilution extemporaneously from the salt. The result was immediate and complete relief. The case was completely cured in a few more days by *Silicea* 30x and Hensel's *Tonicum*.

Bell states that experience with this drug is wanting in children's diarrhœa. In his book, page 21. The symptoms in this case were very striking; the tenesmus in the case had been troublesome for months before the diarrhœa began, but is now completely gone. G. C. BUCHANAN, M. D.

Henning, Minn., Oct. 27, 1891.

VETERINARY DEPARTMENT.

HORSE—LAMENESS.—On the 10th of November, during a professional visit to his family, General Muratt mentioned to me that one of his carriage horses had been lame for over six weeks, and that his veterinarian, after the exhibition of many useless remedies, now proposed to burn it, a procedure which the proprietor deprecated on account of the resulting disfigurement. At his request the horse was brought out, and I noticed it was lame in the right shoulder when fully stepping out. Learning that the animal had been driven rather sharply and then put in a draughty stable, I prescribed *Ferr. mur.* 2d dil., one drachm, to be given three times a day in five-drop doses. I also left *Rhus tox.*, to be given in like manner, should the other medicine fail after a week's trial. After four days' use of the first remedy the horse was driven out without showing any lameness. And after another four days every vestige of the complaint had disappeared. The *Rhus* was not used.—*Dr. Hollenbach, in Cleve, in Pop. H. Z.*

***

HORSE—ANTHRAX FEVER.—In October the Third Regiment of Cuirasseurs was transferred from Vienna to Miscotez, and among the horses stabled in St. Istran, anthrax speedily showed itself; and to such an extent that within three weeks thirty-six horses belonging to the troop and three belonging to the officers had died. The youngest, best conditioned and nourished were the first victims. The only remedy tried against the epidemic was in transferring the regiment, by companies, to isolated villages, but it continued to spread nevertheless. Seeing the utter uselessness of the vigorous antiphlogistic treatment instituted by the head veterinarians, the company commander stationed in our village honored me by putting the horses of his troop under my charge. All the sick horses seemed to be subject to an intense and deep-seated disturbance of the general organism, which chiefly affected the nutritive functions and the ganglionic-nervous system, implicating at the same time the cerebro-spinal nervous system, while the whole attack had an unmistakable

typhoid character, I selected *Arsenicum* as the similimum, and the success exceeded my most sanguine expectations. That the change of location should have occasioned this favorable change was disproved by the fact that in another company located but a mile from here forty-eight horses succumbed under the treatment of the company veterinarian within six weeks.—*Dr. C. Boehme, Veterinarian to Count Erdödy, in Pop. H. Z.*

***

CARIES OF THE LOWER JAW IN CATTLE.—This is by no means a rare affection in cattle. It consists of a hard swelling, about the size of a man's fist, firmly affixed to the lower jaw, and caused by an enlargement of the bone. Sooner or later soft spots appear, which soon secrete a fatty, thin, evil-smelling, ichorous matter, often mixed with blood. When the animal succumbs to the disease, it will be found that the lower jaw bone is of spongy texture, at the place where the matter issued, and of jelly-like consistency, soft and discolored. On cutting open, the bone is found to be infiltrated with the same horrid smelling matter which previously exuded. As a rule, this affection is noticed in young bulls, young oxen or calves, giving a sickly disposition to the animal, and is probably occasioned by mechanical injuries, such as thrusts of a horn, rubbing against the crib, etc. The affection, if not cured, will eventually involve the whole lower jaw, hindering mastication, and compel the animal's disposition to the butcher. On my estate three cases occurred, one in a bull which was so fierce as to preclude the possibility of medication, the next a two-yearly steer which was treated ineffectually allopathically, and the third a two-yearly heifer which I was able to cure within two weeks by Homœopathic medication. The swelling in this heifer had already reached the size of a hen's egg, was hard as stone, conical in form, and firmly attached to the bone. The heifer received for eight days *Asafœtida* twice a day, five or six drops on a wafer, and then for four days *Angustura* also twice a day. By that time the swelling had increased in size to that of one's fist, was red and tense, and gave great pain on being touched. To promote the process of suppurration and facilitate the flow of pus, I now gave four doses of *Hepar s. c.* 1, and after thirty-six hours the swelling copiously secreted the above-described bad smelling matter, and was very much reduced in size. *Asafœtida*, once a day for two days, then speedily converted the ichorous secretion into a thick, odorless, bland pus, which ceased entirely after two days more, and the large swelling was reduced to the size of a finger. A few doses of *Sulphur* completed the cure, and when, some time

after, a small elevation showed itself, *Silicia* 15, in weekly doses, dissipated even this remnant.—*H. B. Moeschler, of Sarichen, in Pop. H. Z.*

***

CANARY BIRD.—Last summer my wife's canary bird commenced to ail. He escaped from the cage and returned, after a prolonged term of investigation, with a bad cold. He lost his sprightliness, became hoarse, finally ceased to sing altogether, and gave vent, from time to time, to a sawing, rasping noise. His looks became unsightly. Finally I was induced to give him some medicine. *Bellad.* 3x was given, five drops in his little water pot. Within a week a decided improvement became manifest. He became more cheerful, looked better, and the rasping and sawing became less. After awhile his voice came back altogether; he sang as well as ever and health seemed to be reestablished. But *Belladonna* 3 had to be put into his drinking water; if it was omitted for three or four days he became hoarse, and his former condition seemed to come back. I would yet remark, that his appetite was undiminished during the whole attack; he even seemed ravenous for food at times.—*Dr. R., in Pop. Hom. Zeitg., Vol. XII.*

***

HORSE—COLIC.—A chestnut gelding was taken with colic one evening, which continued with intermissions, each succeeding attack being more violent. I was called on the morning following. I found the colt very restless and excited, pawing, and switching his tail, looking back at his body, often prepared to urinate, when only a small quantity of urine passed off with difficulty and pain, the penis at times erected. Examination through the rectum showed the bladder to be sensitive and distended; he refused food, and took water only in small swallows; bowels evacuated but once, after applying a clyster in the night; pulse rapid, rump perspiring, while the extremities were cool. This indicated a crampy contraction of the neck of the bladder and possibly inflamed irritation of bladder and intestinal canal. Since this was probably caused by drenching of the skin, I had the patient thoroughly rubbed, swathed in good blankets, and gave *Aconite nap.* 1 every half hour. After the third dose there was visible improvement; became quieter, there appeared less pain in the hindquarters, and some dung was passed. On account of still urging to urinate, I immediately gave a few doses of *Hyoscyamus nig.* 3., when, towards noon, there was a liberal passage of urine, and bran food was taken with evident pleasure.—*Pop. Zeit. fur Hom., Vol. II.*

DOG—SORE EYES.—Nero, a noble stag hound was brought to me by the keeper with a sore eye. An enquiry as to whether the dog had been hit elicited of course no information.

I found a traumatic inflammation of the eye and prescribed my oft approved remedy in similar cases, *Conium* 3 inwardly and twenty drops of the solution to a cupful of tepid warm for external application. Patient to be kept warm and to be most especially guarded against drafts. In twelve days all was well.

***

DOG--WOUNDED BY A MANURE FORK.--This summer I was called to a neighboring village to prescribe for a fine watch dog. The animal had been prodded with a manure fork and as the wound had been neglected at first, a fistulous sore had developed on the right side of the neck. I ordered the utmost cleanlines as the wound looked bad, and the removal of the dog collar, for that occasioned incessant irritation. Patient received *Pulsatilla* 3 five drops twice a day, and on the third day one dose *Calcarea carb.* 3x, dry. In a very short time the animal was cured much to our satisfaction.

DOG—INDURATION OF TEATS.—At a hunting party a bitch was brought on, which had been cured of an inflammation of the teats with *Chamomilla*, but one of them had a stubborn induration and secreted no milk. I prescribed *Mercur. sol.* 3x, one dose of about two grains per day, and in about two weeks the induration had became soft, and shortly after was cured.—*Dr. Gottweis, in Pop. H. Ztg.*

***

ONE-SIDED LAMENESS OR TORPOR IN A PIG.—A young pig scarce five months old, the left side of which felt stiff and cold, while the right side evinced a high temperature, and both legs of that side were in constant motion. The eye of the affected side was half closed and the snout bluish, the voice was still vigorous but very peculiar. As I had not seen a similar case for many years I could give no positive prognosis, but the owner was willing to give our remedies a trial. I first gave *Aconite* 12th, 5 doses, each 3 drops, half an hour apart, and knowing the curative property of *Cocculus* in one-sided contractions, followed with that remedy, after an interval of three hours, giving five doses of three drops each of the 12th potency. Within five hours the voice underwent a change, as well as the color of the snout, and after about eighteen hours the little pig seemed to be as lively as ever, had an appetite and showed no trace of tension or lameness.—*Dr. Heemame, Swiss Veterinarian, Pop. Hom. Ztg.*

AN EPISODE IN HOMŒOPATHY.

About two years ago Mr. A. J. Tafel, seeing the numerous inquiries for a cure for roup, in *The Poultry Keeper*, a widely circulated journal, wrote a note to the editor suggesting *Spongia* 15 as a cure based on previous experience. Mr. Jacobs, the editor, published the note, and in a few months scattering reports of cures began to come in. These soon swelled to such proportions that only comparatively few could be published—yet in one issue these occupied two pages of the *Poultry Keeper*. The suggestion of *Spongia* for roup has saved poultrymen thousands of dollars; and, one would think, would lead to the adoption of Homœopathic treatment for the ills of man, where its success in the treatment of this hitherto incurable ailment of fowls was known, but it is doubtful if such is the case. Mankind, as a whole, is dreadfully set in its ways. When it is sick it thinks it must have "strong" medicines to cure a violent disease, or even one of moderate intensity, and swallows these, day after day, getting sicker and sicker, and never opening its great stupid eyes to the fact that it is oftener than not the drugs that are prolonging the trouble, and slowly killing, and not the original disease. But the good time is coming and every stir of this sort helps it along.

This itch for strong medicine was amusingly shown in the *Poultry Keeper*. The original recommendation was *Spongia* 15. Perhaps not one reader in a thousand knew what the "15" meant, so they wrote for "*Spongia* 15," and made most brilliant cures with it. Soon the secret of the number leaked out, and an Allopathic doctor got off the old chestnut about how much sugar of milk it would take to "triturate an ounce of sponge" up to the 15th. He didn't know how *Spongia* was made, and he didn't know the difference between the decimal scale and the centesimal, but he industriously "proved" that *Spongia* in such proportions could not cure. He had figured it on the decimal scale; had his figures been on the centesimal scale, as they should have been, the result might have been dangerous to him. Though numerous replies to this were published, asserting that *Spongia* 15 *did cure* rapidly and effectually, nevertheless the call came for *Spongia* tincture or *Spongia* 3. The public could not grasp the fact that the 15th could cure, even though the evidence, thick as blackberries, was before its eyes. It didn't say that the chickens would have "got well anyhow," or that it was "imagination" on their part, it merely wanted something less inconceivable than the 15th.

The following are a few from the many letters published in the *Poultry Keeper:*

"I consider *Spongia* for roup excellent. It has already saved me many dollars."—*M. H. Phillips, Larimore, North Dakota.*

"Your *Spongia* recommendation has been worth many times the price of the paper. I had roup in my flock, and tried everything. Over one hundred fowls had roup, but *Spongia* entirely cured them all."—*Wm. Murray, Sanford, Fla.*

"I cured roup with *Spongia*—it cures every time."—*W. G. Axley, Atlantic City, N. J.*

"I wish to thank you for the *Spongia* remedy. Since using it I have had no more of that choking breathing of my fowls."—*Chas. Martin, Tuscola, Ill.*

"I will say, for those who have doubts, that *Spongia* is a *positive cure.* I had over one hundred birds affected, and it cured every one of them without being obliged to handle them. I found the best results from using the mother tincture [probably dilution]—four drops to the gallon of water. *Spongia* is a godsend to the poultry fraternity."—*W. F. Brace, Victor, N. Y.*

"I have tried *Spongia* with excellent results, curing one turkey hen that was entirely blind, and her bill was open half an inch from the hard, yellow substance on the tongue. I would have killed her, but kept her to make a test with *Spongia*."—*Mrs. E. Hatfield, Rono, Ind.*

"*Spongia* is a great cure for roup. I have tried it and it has never failed once."—*Samuel Taylor, South Norwalk, Ct.*

"I think *Spongia* the best thing I ever saw for roup. I had a Silver Hamburg cockerel that had the roup the worst I ever saw, and I cured him, to my surprise, thanks to *Poultry Keeper.*"—*J. P. Van Metre, Yorktown, Ind.*

"To say that *Spongia* is indispensable is answering the question mildly. I have tried it on some of the worse cases I ever had, with perfect cure. I add my praise, and rejoice over this great discovery."—*Charles Deal, Shreveport, La.*

."I would like to say a word in regard to *Spongia.* I have not had roup among my fowls since it was first mentioned in your paper, but one of my neighbors came to me a few weeks ago, asking what to do for her chickens. She had lost twenty-eight fine hens with roup, and a large number were sick. Some of them were past help, and would surely die. I remembered *Spongia*, and told her to try it. I had no experience with it, but knew it would not harm them, even if it failed to cure. Well, she caught the worst of them, penned them up, and gave each hen two pellets, and used two twenty-five cent bottles on the rest

of her flock, and she did not lose a single one. In fact it cured the sickest hen. This neighbor, in turn, recommended it to another friend, who had it in a flock of about one hundred hens, and had the same good result."—*Mrs. S. W. McCuen, Watsonville, Cal.*

"During early fall I lost, by roup, some valuable White Wyandottes and Plymouth Rocks. I had tried all things recommended in books and journals, without any benefit. I was about discouraged, and felt very bad at the prospect of losing my beauties. One morning I noticed that an elegant White Wyandotte cockerel and Plymouth Rock hen had badly swelled heads, and that their breath was horrible, so bad as to fill the house with its awful odor, etc. As I have had but little sickness in my hen family, I was at a loss what to do, as all things had failed. I went into my library and sat down to ponder on the condition of affairs. I picked up an issue of the *Poultry Keeper*, and therein saw one of your articles on *Spongia*. After carefully reading it through I hastened to get *Spongia*. I caught my roupy fowls and put them into a warm house, and began giving them *Spongia* in water, and now, five weeks later, all are cured, and not a vestige of roup in my flock, while eggs are beginning to come in three dozen lots. So you see, in my case, your *Spongia* has been a godsend almost to my hen family.—*Capt. W. A. Phillips, Chicago, Ill.*

We might fill pages of the RECORDER with similar extracts, but enough have been given to show the nature of this little episode in Homœopathy. The interest in the matter is still kept up among poultry raisers and it has been the means of calling the attention of thousands to Homœopathy.

BOOK NOTICES.

The Clinical Guide; or Pocket Repertory for the Treatment of Acute and Chronic Diseases. By G. G. Jahr. Translated by C. J. Hempel, M. D. Second Edition, revised by S. Lilienthal, M. D. 624 pp. Half morocco, $3. Philadelphia. Hahnemann Publishing House. 1891.

Every Homœopathic physician knows of Jahr, and probably the greater number of those who were in practice a decade ago know of or possess a copy of his invaluable *Clinical Guide*. But later graduates, those of the last twelve years, or so, have had no opportunity of possessing the book, as it has been out of print

for that period of time. The present edition, brought out by the Hahnemann Publishing House, will be welcomed by many physicians and valued highly by all who once become familar with it. It should be stated here that no changes have been made in the text of the book, or additions, it being an elegant duplicate of the second edition. The sub-title, "pocket repertory," may have been descriptive in the earlier edition, but hardly applies to the present volume, which is a handsome book that would require a larger pocket to hold than tailors now make.

The translation is from Jahr's third edition, and to this the late Dr. Lilienthal added the established new remedies, so that the book really covers the whole Homœopathic Materia Medica.

This book has many points peculiarly its own. While not new to older practitioners the author's views on the vexed potency question may be new to some of the younger men. He says that the difference between the various degrees of a potentized medicine does not consist "in its strength or weakness, but in the *development of the peculiarities* of the remedy, furthered perhaps by percussion, so that, the higher we ascend, we find more clearly *the special and peculiar character of the remedy*." Many remedies, he says, in the low form have symptoms in common, and "one as well as the other may help in low dilution." But as they ascend in potency they diverge and assume distinct personalities, and the higher the potency the wider the divergence and the more distinct the remedy. He has a chart showing his idea on this subject; the potencies marked on it are 1, 15, 30, 60, and 120.

The book is really a Repertory, a Clinical Guide and a Materia Medica combined in one, and its arrangement will cause it to be often consulted. The printing, paper and binding are excellent.

The Greater Diseases of the Liver: Jaundice, Gall-stones, Enlargements, Tumours, and Cancer: and Their Treatment. By J. Compton Burnett, M. D. 186 pages. 12mo. Cloth, 60 cents *net*. Philadelphia. Hahnemann Publishing House. 1891.

This handsome little volume has two interesting features: the first is that it is written by Burnett, who is always interesting; and the second, that it is the first Homœopathic publication brought out under the new international copyright act. "The prevailing ignorance," writes Dr. Burnett, "of good organ-remedies is lamentable. Not long since a lady came to me for a chronic liver affection of nine years' standing, and, though her physician is a man of high standing in the profession, and a doctor of medicine of the University of London, his sole treat-

ment had consisted in giving the accursed morphia to lull the pains. He had never even tried one single good organ-remedy, and this notwithstanding the fact that the patient has long been profoundly jaundiced. And this, too, is, I fear, a fair sample of the everyday work of the men of light and leading in the profession. * * * It is in the hope of throwing a little light into this dismal darkness that these pages are sent to the press."

Every one knows what a bilious, jaundiced man is—a man with a liver—and for the public peace of mind ought to welcome a book that, if its teachings be followed, will transform these gloomy, melancholic subjects into agreeable citizens. The volume is dedicated to Rademacher, that rare old genius. It is a work that ought to sell rapidly. It will give every buyer the full value of his money. The price is 60 cents *net*—no discounts. The price by mail, post paid, is 66 cents.

Essentials of Physiology. Arranged in the form of questions and answers, prepared especially for students of medicine. By H. A. Hare, B. Sc., M. D. Third edition, thoroughly revised and enlarged, by the addition of a series of handsome plate illustrations taken from the celebrated "Iccones nervorum capitis" of Arnold. Philadelphia, 1891. W. B. Saunders. Cloth, $1.00.

The additions to this work consist of forty-seven pages of text matter, with nine well engraved plates, opposite to which are "keys" to the engraved plates which consist of wood-cut plates with numbers and letters on them referring to text. The engraving is very well done indeed. The remainder of the work contains the "essentials of physiology" in the question and answer form. Dr. Hare, the author, is a Jefferson College man.

3,000 Questions on Medical Subjects. Arranged for self-examination. Philadelphia, 1891. P. Blakiston, Son & Co.

This is a little volume of 144 pages, interleaved with blank pages, containing, as title indicates, 3,000 questions with reference to where the answers may be found. It will be sent by the publisher, on receipt of ten cents, to medical students.

Essentials of Anatomy and Manual of Practical Dissection, together with the Anatomy of the Viscera. Prepared especially for students of medicine. By Charles B. Nancrede, M. D. Fourth edition, revised and enlarged. Philadelphia, 1891. W. B. Saunders. Cloth, $2.00.

The difference between the third edition of this work, noticed in the RECORDER, November, 1890, and this, the fourth edition,

is that the latter contains an "Appendix" of "Hints on Dissection," by J. Chalmers da Costa, M. D. This appendix, which, by the way, precedes instead of follows the older text, consists of fifty-three pages of text matter. Preceding these are the thirty full page lithographic plates, of various parts of the human body in colors, and following them are three hundred and eighty-eight pages of questions and answers on the human anatomy. This latter part contains one hundred and eighty-eight wood-cuts among which are included the osteological plates from Gray's anatomy. The whole constitutes a very useful work for students of anatomy.

DR. THOS. L. BRADFORD, of Philadelphia, has in preparation a unique book. It will contain alphabetical lists of Homœopathic books, magazines and pamphlets, also condensed statements, data and histories of the Homœopathic societies, colleges, hospitals, asylums, homes, dispensaries, pharmacies, publishers, directories, legislation, principal books written against Homœopathy, and Homœopathic libraries, now or at any time existent, in the United States. The doctor deserves the support of the profession in his undertaking.—*Medical Era*.

Poisonous House Decorations, and **Hypnotism**, are the titles of two papers by Dr. W. B. Clarke, of Indianapolis, which come to us in one pamphlet.

Inflammations of the Right Iliac Fossa, and their Surgical Treatment, is the title of a handsome pamphlet reprint of Dr. Van Lennep's paper, read at the last Institute meeting.

NOTES ON FORTHCOMING BOOKS.

McMichael Compendium. Materia Medica and Repertory.

Work on this original and, what promises to be, most practicable and useful book is progressing rapidly. The date of publication cannot be exactly determined yet, nor the price, but the one will be early and the other as low as an elegant quarto can be produced. This publication will do more towards making the hunt for *the* remedy easy and successful than, perhaps, any book ever published.

With the Pousse Cafe.

Under this title an elegant volume of verse will shortly appear from the pen of Homœopathy's poet laureate, Helmuth. The work is in the printer's hands, and will be out in time for the Christmas holidays; it promises to be a most elegant volume in

respect to paper, type, press work and binding, as the publishers are endeavoring to make their part a fitting setting for the Helmuth jewels.

Bradford's Homœopathic Bibliography.

Dr. Bradford's great work, as our readers may know, is not only a bibliography of *all* the Homœopathic works and pamphlets originating in the United States, and also of Hahnemann's writings, but also includes practically everything else pertaining to Homœopathy from societies (including names of their original officers) and colleges to publishers and pharmacies. It is a great work and a valuable one. It will be one of the *best* books to put on the table of the reception room for patients ever published—will give them, and all who look over its pages, an idea of the *size* of Homœopathy, in fact, dear reader, it will probably make you, educated and trained Homœopath that you are, open your eyes. We recently passed a pleasant half-hour with the author, and "the book" was brought out. "Why, hello! What did *he* write?" was almost the first exclamation on looking at the preliminary list of writers. And what a list it is!

Every one *ought* to subscribe for this book, and at once. It is not in the printer's hands yet but waiting for a sufficient number of Homœopathy's ten thousand physicians to send in their subscriptions to justify the publication. Two hundred and fifty of the ten thousand will be enough, but apparently each one holds back to give his neighbor room at the subscription desk. The cost will be $3.00, payable on delivery of book. Subscriptions may be sent to the author, Dr. T. L. Bradford, 1862 Frankford avenue, Philadelphia.

Allen's Materia Medica Primer.

The "primer" is in the typo's hands and rapidly approaching completion. It will be a valuable book for students, and indeed for all interested in the subject of materia medica, and who is not? It gives a masterly summary of each remedy, its ground plan—outline—and when this is once firmly fixed in the mind the finer shades can be easily placed in the memory, for they then have a resting place, a foundation. The book will probably be out shortly after New Year.

We are promised a new "domestic" by Dr. Verdi. It will devote special attention to diagnosis and pathology. From specimens conned it promises to be a book that even the physician will not disdain consulting.

Dr. Bushrod James announces a new edition of his "American Climates and Resorts."

Homœopathic Recorder.

PUBLISHED BI-MONTHLY BY

BOERICKE & TAFEL,

1011 Arch Street, Philadelphia, Pa.

9 North Queen Street, Lancaster, Pa.

SUBSCRIPTION, $1.00 PER ANNUM.

Address communications, books, etc., for the Editor to E. P. Anshutz, P. O. Box 921, Philadelphia, Pa.

WITH this number, Vol. VI. of the HOMŒOPATHIC RECORDER is completed, and we hope that all of our subscribers will promptly fill out the subscription blanks enclosed and send in renewals for Vol. VII. Also, we indulge in the hope that a goodly number of those who received specimen copies will favor us with their subscriptions. Our regular subscription list is already a very large one as Homœopathic journals go, but, like Master Twist, we ask for "more."

MESSRS. BOERICKE & TAFEL have sold their pharmacy at 604 Nicollet avenue, Minneapolis, Minn., to Messrs. Babendreier & Van Nest, who will continue the business under the name of Minneapolis Pharmacy Company. Mr. Babendreier is well known to physicians in the Northwest as a skilled and accomplished Homœopathic pharmacist. He has had nineteen years' experience in the profession, in the employ of the old firm whose Northwestern pharmacy he has just bought, and the medical profession may feel assured that under his management that business will be conducted on the same high plane in the future that it occupied in the past.

KEELEY'S *Bichloride of gold* treatment for drunkenness has stepped into the shoes of Koch's *Lymph*, and is now the medical wonder of the hour. The newspapers and magazines are giving it, or Dr. Keeley, lots of free advertising. Reports of cures are numerous and praises from patients loud. One gentleman, a preacher, writes (*North American Review*): "After two weeks suddenly, as if I had stepped out of the blackness of an African jungle into the quiet sunshine of Central Park, I broke out of my living tomb and knew that I was cured." Strong, even if poetical, endorsements of this nature has created a demand for *Bichloride of gold*, but physicians may as well save their paper and postage, for Dr. Keeley's preparation is a secret which

he will not reveal, or, at least, has not revealed. It is not in the Pharmacopœia, and no drug house, American or European, has it on their lists. Its cures are not all permanent, for six members of the *Bichloride of gold* club, composed of those purporting to have been cured, have been stricken from the rolls because they went back to their former habits.

There is the same curious parallelism between this new secret remedy and Homœopathic *Aurum* as there was between the "lymph" and *Tuberculin*. Dr. Burnett, in his *New Cure for Consumption*, reports some very striking and permanent results from the administration of *Tuberculin* in consumption. Koch reported the same from a sort of indirect preparation from the same source, hypodermically given. Dr. Burnett's cures were permanent, while Koch's all lapsed. Now, if any one will open his copy of Hahnemann's *Materia Medica Pura* at *Aurum* he will see some symptoms which very strongly resemble those of men suffering from alcoholism. There is one especially noteworthy and in black letter: "In the morning, from four o'clock onward, he cannot sleep properly any longer; he tosses about restlessly, from one side to the other, because he cannot lie long in one position."

In the sleep produced by whiskey there is always an awakening about 4 o'clock, followed by restlessness, causing a wish that it were time to arise, and none of that luxurious desire to turn over and go to sleep again, which usually follows an early awakening from a healthy sleep. The strong resemblance between the mental state of *Aurum* and that of the hard drinker when he gets to that state when he must take a bracer or shoot himself, is apparent to any one who reads up in Hahnemann's *Materia Medica Pura*.

THE ALLOPATHS have tired of their last toy, borrowed from Homœopathy, and tossed it aside. A correspondent of the *N. Y. Medical Journal* says: "I have added it [*Arsenite of copper*] to nearly all diarrhœa mixtures for the last two years, without being able to perceive any increased efficacy in the prescriptions." In a case of "diarrhœa of long standing in a man having cirrhosis of the liver," he gave it in small doses "every ten minutes, for days at a time," and did not cure the man! *Mirabile dictu!* This, and similar cases, he thinks, "prove it to be none other than a chemical curiosity." Only this, and nothing more. What a pity that doctor could not be induced to honestly read a copy of Hahnemann's *Organon*, then study and experiment, with knowledge to be gained from Raue's *Special Pathology and Therapeutic Hints*, and finally wheel into a line that is "regular" in fact, but not in name, by a post-graduate course at some good Homœopathic college.